

COPY

**COMMUNITY SERVICES BLOCK GRANT  
2010/2011 PROGRAM YEAR COMMUNITY ACTION PLAN  
COVER PAGE**

TO: Department of Community Services and Development  
Attention: Field Operations  
P. O. Box 1947  
Sacramento, CA 95812-1947

FROM: Agency: Lake County Community Action Agency  
Address: P O Box 969, 15312 Lakeshore Dr.  
City: Clearlake, CA. 95422

**Agency Contact Person Regarding Community Action Plan**

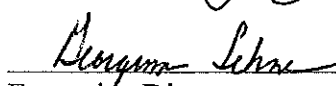
Name: Georgina Lehne  
Title: Executive Director  
Phone: 707 995-2920 ext. 101  
FAX: 707 995-2825  
E-mail address: georgina@lakepartnership.org

**CERTIFICATION OF COMMUNITY ACTION PLAN AND ASSURANCES**

The undersigned hereby certify that this agency complies with the Assurances and Requirements of this 2010/2011 Community Action Plan and the information in this CAP is correct and has been authorized by the governing body of this organization.

  
Board Chairperson

21 July 09  
Date

  
Executive Director

July 21, 2009  
Date

COPY

## COMMUNITY ACTION PLAN REQUIREMENTS

### Summary/Checklist

The 2010/2011 Request for Community Action Plan (CAP) must meet specific requirements as defined by law, and described in detail in this package. The CAP forms, with specific instructions on how to complete each form are assembled separately for ease in preparing. Once you have completed your CAP, submit to CSD one original document (marked "original") and one copy (marked "copy") postmarked no later than **June 30, 2009**. ***Please allow adequate time for Community Action Plan development, review and approval prior to the due date.***

The following is a check list of the components to be included in the CAP your agency submits to CSD:

- ☒ CAP Cover Page with appropriate signatures
- ☒ Table of Contents and all CAP pages numbered
- ☒ Agency Vision & Mission Statements and Strategic Plan
- ☒ Copy of Strategic Plan
- ☒ Requirement 1: Community Information Profile and Needs Assessment
- ☒ Requirement 2: Statewide Priority
- ☒ Requirement 3: Federal Assurances
- ☒ Requirement 4: State Assurances
- ☒ Requirement 5: Public Hearing Documentation
- ☒ Requirement 6: Monitoring and Evaluation Plan
- ☒ CSD 801: CSBG/NPI Programs Report

**Copy**

## AGENCY VISION & MISSION STATEMENTS and STRATEGIC PLAN

**Note: As part of its commitment to involvement in the CAP process, our Board of Directors met on June 12, 2009. They discussed the agency's Vision of community action in Lake County and its Mission and approved a new Vision and Mission for the agency, as detailed below:**

The Vision Statement describes a desired future based on your agency's values. The vision is broader than what any one agency can achieve; the agency collaborates with others in pursuit of the vision.

Provide your agency's Vision Statement.

### VISION STATEMENT:

***"Empowering personal success."***

The Mission Statement describes the agency's reason for existence and may state its role in reaching its vision.

Provide your agency's Mission Statement.

### MISSION STATEMENT: BOARD'S MISSION:

***"We support staff by removing barriers and help provide resources."***

#### AGENCY'S MISSION STATEMENT

"WE REMOVE THE BARRIERS TO PERSONAL SUCCESS BY PROVIDING OUR CLIENTS WITH DIRECT SERVICES, TRAINING AND ONGOING SUPPORT."

### STRATEGIC PLAN:

Does your Agency have a Strategic Plan? ☒ Yes ☐ No  
If yes, please attach a copy.

**The Strategic Planning Process:**

A strategic plan is an action-oriented ongoing document that focuses on achieving meaningful and sustainable results for the Lake County Community Action Agency. The intent of the document is to answer key questions and set the priorities in sufficient detail that will serve as a guide for the agency.

The Lake County Community Action Agency strategic planning process involved the first of many meetings that will help confirm the direction of the agency and measurable strategic priorities with key board and staff members for the years 2009-2011.

The process included the following steps:

- On April 9, 2009 Lake County Community Action Agency Board of Directors and key staff held a day-long off-site retreat to discuss the agencies current mission, vision and core values of service delivery and to began the process of the strategic priorities and areas of focus over the next three years.
- On May 14<sup>th</sup>, and June 11<sup>th</sup>, at the board meeting, the board chair lead a discussion regarding the proposed vision and mission statement, at each board meeting will be and ongoing decision of the direction that was established during the retreat.
- To look at the direction of the organization that can provide services that we cannot achieve alone. Key questions asked during the retreat were: What future are we able to create and how would the community be improved or changed if we are successful?
- The board and key staff members will help identify

**Organizational Identity:**

**Vision, Mission and Core Values Statements**

At the foundation of all organizational success lie agreements about collective purpose and values. The statements that articulate those core values and commitments provide clear information to outsiders about what you stand for and what work you do. They also serve to keep everyone in the organization focused around the same purpose, results, and agreements. These statements should be omnipresent – in outward communications and referenced in internal decision-making. They also should be reassessed periodically to ensure they accurately reflect the board/staff commitment.

copy

**Requirement 1**  
**COMMUNITY INFORMATION PROFILE & NEEDS ASSESSMENT**

State law requires each CSBG eligible entity to develop a Community Action Plan (CAP) that will assess poverty-related needs, available resources, and feasible goals and strategies to prioritize its services and activities to promote the goals of self-sufficiency among the low-income populations in its service area. (Government Code 12747(a))

Each CAP shall include the Community Information Profile and Needs Assessment as follows:

**NOTE: Our Community Information Profile and Needs Assessment are attached in one document following PAGE 7.**

1. **Community Information Profile:** Describes the problems and causes of poverty in the agency's service area, based on objective, verifiable data and information. (Government Code 12754(a))

Attach or type your agency's Community Information Profile which must include a narrative description of:

- A. Agency's service area in terms of factors such as poverty, unemployment, educational attainment, health, nutrition, housing conditions, homelessness, crime rates, incidents of delinquency, the degree of participation by community members in the affairs of their communities and/or other similar factors deemed appropriate by the agency. Factors described in the Community Information Profile must be typical for baseline data and substantiated by corroboration gained through public forums, customer questionnaires, surveys of service providers, surveys of potential customers, statistical data, evaluation studies, key informants, anecdotal sources and/or other sources deemed reliable by the agency.
- B. Community resources and services, other than CSBG, which are available in the agency's service area to ameliorate the causes of poverty and the extent to which your agency has established linkages with those service providers.
- C. Your agency's plan for periodically reviewing and revising the Community Information Profile. In particular, describe how your agency ensures that the most current data and relevant factors are included.

2. **Needs Assessment:** Describes local poverty-related needs, with further identification and prioritization of the eligible activities to be funded by CSBG. It also serves as the basis for the agency's goals, problem statement(s) and program delivery strategy(s).

Attach or type your agency's Needs Assessment. The Needs Assessment should analyze the demographic and economic conditions and other poverty-related factors identified in your Community Information Profile.

- A. Assessment of existing resources providing the minimum services listed in Government Code section 12745(f). These services shall include, but shall not be limited to, all of the following:
  - i. A service to help the poor complete the various required application forms, and when necessary and possible, to help them gather verification of the contents of completed applications.
  - ii. A service to explain program requirements and client responsibilities in programs serving the poor.
  - iii. A service to provide transportation, when necessary and possible.
  - iv. A service which does all things necessary to make the programs accessible to the poor, so that they may become self-sufficient.
- B. Specific information about how much and how effective assistance is being provided to deal with the problems and causes of poverty. (Government Code 12754(a))
- C. Establishment of priorities among projects, activities and areas for the best and most efficient use of CSBG resources. (Government Code 12754(a))
- D. The process your agency utilizes to collect the most applicable information to be included as part of the needs assessment. In particular, describe how your agency ensures that the needs assessment reflects the current priorities of the low-income population in your service area, beyond the legal requirement for a local public hearing of the community action plan.
- E. Your agency's plan for periodically reviewing and revising the needs assessment.

## Requirement 1

### COMMUNITY INFORMATION PROFILE & NEEDS ASSESSMENT

#### 1. Community Information Profile.

##### A. DESCRIPTION OF SERVICE AREA

**A.1. Introduction to Lake County:** Lake County, California (population 65,933) is a lovely, rural, isolated area which has long been an affordable vacation and retirement destination for working families from the Bay Area and elsewhere. The County is famous for the cleanest air in the state, Clear Lake (California's largest all-natural lake), and an outdoor, small-town lifestyle. It is located about 100 miles north of San Francisco and 50 miles east of the Pacific Ocean and covers 1,258 square miles.

The County is ringed by mountains and divided by Clear Lake. It is cut off from California's two main north-south transportation corridors: Highway 101 to the west and Highway 5 to the east. There are only four access points to the County. All are two-lane roads through mountain passes. All are difficult to drive, even in good weather. These roads can be blocked by ice, mudslides, or fire; some winters, the County has been completely cut off. Residents often have to go out-of-County for specialty health care, including pediatric, high risk pregnancy, sedated dentistry, and veterans' care.

Residents are scattered around the lake in about 13 small towns and settlements, plus the Native American Rancherias. (See Map.) Our only two incorporated cities are: Lakeport, the County seat (population estimated at 5,126), and Clearlake, the largest population center (population estimated at 15,000). Even in Clearlake and Lakeport, the streets revert to unpaved, unlit, unmarked roads just blocks from the town centers. Public transit ends at 6 p.m.; its routes remain limited. Some outlying areas still lack electricity and running water. Cell phone coverage remains spotty.

Our rugged rural geography, winding two-lane roads, and widely-separated towns cut off residents from each other and from services, including health care, recreation, social support, employment, and even food. Seniors who vacationed here in their youth or who are seeking affordable housing settle here to spend their golden years in the peaceful country. Many don't realize how isolated the County is and how far apart the towns are. Our streets revert to unpaved, unmarked roads just blocks from the main streets, even in Clearlake and Lakeport. Therefore, providers must bring services to multiple locations, either directly or through partners.

*Suitable living environment.* Lake County's extreme weather conditions disproportionately affect the poor. Summers regularly reach 115°, while the winters bring snow, hail, and driving rain. The temperature extremes can be life-threatening, especially for the young, the elderly, and the medically fragile. Our low-income community endures these extremes in un-insulated travel trailers, wooden sheds,

campgrounds, and garages. This past year, we have seen more and more families forced to double-up or even triple-up. Situations in which 15 individuals are living in a one-bedroom home are increasingly common. Loss of utilities and water directly affect health, mental and emotional wellness, overall wellbeing. Adults who cannot stay clean cannot stay employed; dirty children will avoid school for fear of ostracism.

Ethnically, Lake County is increasingly diverse. From overwhelmingly white in 2004 (86.4%), it has changed to 76.2% white and 15.3% Latino, up to 28% Latino in some areas. Lake County's Native American population is more influential than its small size (3%) indicates. By percentage, our Native American population is one of the largest in the nation, more than triple either California (1%) or the nation (.9%) rates. Birth rate and school enrollment indicate that Native Americans actually comprise about 5% of the County's residents. Our indigenous tribes are Pomo; members of other tribes are moving here, creating diversity within diversity. The three largest Pomo tribes (Big Valley, Middletown, Robinson Rancheria) each operate a casino.

Younger residents are more diverse than older ones, as the following table indicates. Further, each age group has its own age-specific issues, from early childhood education to Alzheimer's prevention and support. Therefore, service providers must be aware of ethnic and age-based differences among groups in order to provide culturally competent, effective services to them.

	White	African-American	Latino	Native American	Asian/Pacific Islander	Mixed/No Response
60+ <sup>1</sup>	84.2%	2.6%	7.9%	2%	1.2%	2%
All ages <sup>2</sup>	76.2	2.4	15.3	3.2	1.6%	N/A
Preschool <sup>3</sup>	58%	4%	33%	3%	2%	N/A
K-12 <sup>4</sup>	63.9%	2.7%	19.9%	5.3%	1.6%	6.6%
California <sup>2</sup>	42.7%	6.7%	36.2%	1.2%	12.8%	N/A

<sup>1</sup> CA Department of Aging, Table 114, Projected Population Age 60 and Over for 2010 <sup>2</sup>Census QuickFacts 2007 (most recent available) <sup>3</sup> Provided by LCOE state preschools for 2008-2009.

<sup>4</sup>California Department of Education

## **A2. Description of Service Area by Key Factors**

### **I. Poverty:**

Lake County uses a broad definition of poverty, "... the extent to which an individual does without resources ..." that reflects poverty's multi-dimensional impact on the lives of individuals and on the community as a whole. "Resources" includes money, but also: emotional resources (resilience, persistence); mental resources (capacity to read, write, think); spiritual resources (purpose and belief); physical resources (healthy body); support systems (people who care, listen, and help); relationships/role models (nurturing, successful), and finally, knowledge of the hidden rules of class (food, dress, manners, speech) (Payne, R., Ph.D., A Framework for Understanding Poverty, 4<sup>th</sup> rev. ed. 2005, aha! Process Inc.).



Poverty is the County's chronic, global challenge. Poverty levels rose to 16.4% (US Census SAIPE 12/2008, downloaded 2009), 132% of the state rate of 12.4%.<sup>6</sup>; 31% of children live in poverty. Our median household income was only 76.2% of the national median (US Census American FactFinder 2009; SAIPE) and only 63% of the state median (US Census, SAIPE). If Lake County were a state, its median income would be lower than Louisiana's median income.

Poverty perpetuates itself. The paradox of poverty is that the poor pay more for things, either in direct costs or in the time and hassles it takes to obtain health care or job readiness or the Laundromat. Because the poor cannot afford the "giant economy size" of anything, they pay more per unit for food and supplies. Living in substandard housing affects health, hygiene, and nutrition. Some houses do not have stoves or refrigerators; some families cannot afford the power to run them. These low-income residents rely on expensive and less-healthy fast food. Poverty and fear can trap families into staying in unsafe neighborhoods or substandard housing. Victims of domestic violence or child abuse may be too afraid of losing the abuser's income to seek help. Poverty reduces the tax-base, so local governments can't afford resources that promote wellness, such as sidewalks, frequent bus routes, public recreation programs, swimming pools, community centers, and the like. All of these stresses and gaps have a cumulative effect. People living in poverty are more likely to be depressed and less likely to be able to muster the energy to seek help and change their lives.

A specific and increasingly-relevant example of how poverty reinforces itself is how the poor are locked out of, or must pay more for, basic financial services. Banks regularly refuse to open checking accounts for people with bad credit. People without checking accounts have to pay bills using money orders or check-cashing stores. It can cost \$3 for one money order to pay one bill. Companies that forward payment to telephone or utilities companies impose services charges of 10%. Check-cashing companies charge significant fees, e.g., \$15 to cash a \$300 check. When a cash-advance company loans money against a future paycheck, the actual annual percentage rate can be 805%. New laws have restricted these rates in some states. The affected companies now require security, e.g., the title to a person's car.

**II. Population Groups.** Lake County's population is heavily weighted with groups likely to be poor or at greater risk of poverty due to a wide range of vulnerabilities.

These include:

- ✓ Children aged 0-18 in poverty comprise about 26.8% of Lake County's population, compared to 17.3% statewide and 18% nationally. Various studies concur that at least 20% of children under 18 live in poverty (SAIPE 2007; most recent available). The 2007 Children Now Data Book found 31% of Lake County children aged 0-17 lived in poverty. The number of children living in poverty ranges from 4,241 (26.8% x 65,933) to 4,905 (31% x 65,933).
- ✓ Older adults, aged 60+ comprise 24.9% of the population. Lake County has the

highest population of older adults in California, by percentage: 26.8% of residents are 60+, compared to 14% nationally (Department of Finance, Table E-3, May 2009). Between 1990-2000, the population of adults aged 55-59 rose by 45.4%. They are now in their mid-to-late 60's. The County must prepare for a boom in its older adult population.

- ✓ Disabled children and youth (aged 5-20), at 10.3% or about 12,596 persons. A 2004 survey of older adults served by the Area Agency on Aging found that 53.3% of older adults reported one or more disabilities, as did 46.8% of their caregivers. Nearly one-third (32.3%) of all adults aged 21-64 are disabled, about 30,836 persons.
- ✓ Native Americans, at approximately 5% of the population. Local Native Americans suffer from extreme poverty. The Lake County Tribal Health Consortium, Inc. ("LCTHC"), our Indian Health Services provider, found that 93% of its native clients were low-income. Tribal information provided to LCTHC suggests that 83% of working-age Rancheria residents are unemployed, despite the casinos' Native American hiring preferences.
- ✓ Latinos, at approximately 15.3% of the general population, rising to about 19.9% of school-aged children and 33% of preschoolers. Many local Latinos are new to the area and are in entry-level agricultural or service jobs, working their way up.

Children (0-17) and older adults (60+) comprise about 50.8% of the total population. Because about half of the County's residents are likely to require support services, our population structure greatly increases the local need for health and human services, while reducing local capacity to pay for them. Further, groups advocating for one or the other sometimes find themselves competing with each other for scarce resources.

Nationally, the number of the severely poor grew by 26% between 2000-2005. This growth was 56% faster than the growth of the overall poverty population, outpacing every other population segment. "Severely poor" was defined as individuals making less than \$5,080 per year or a family of four with two children and an annual income of less than \$9,903. In the early 2000's, California had the highest number of severely poor in the nation (Economic Policy Institute, *Income inequality grew across the country over the past 2 decades*. January 27, 2006). The California Budget Project confirmed rising income inequality in California, via an analysis of incomes from 1979-2006. The average gross income of the top1% increased from 25.5 times to 48.4 times that of the middle class from 1995 – 2005. The middle class held its ground, but only because working wives increased their hours by 36.3% or about eight work weeks/year. Given rising unemployment, this option may be gone. The Budget Project attributed the change to: (1) decline in the dollar's purchasing power; and (2) differences in educational attainment (The California Budget Project, *A Generation of Widening Inequality: The State of Working California, 1970 to 2006*, <http://www.cbp.org>). Lake County was already vulnerable to these trends, which are now affecting even our top earners (DSS presentation – see *Current Indicators*).

*Current Indicators of Rising Economic Distress in Lake County.* In May 2009, the Lake County Department of Social Services ("DSS") reported to the Board of Supervisors on the growing demand for its assistance. More people are applying and qualifying for assistance, some in more than one program.

Specifically, from December 2007 to December 2008:

- ✓ **Food Stamps** cases increased 28%, for a total of 2,893 cases.
- ✓ **CalWORKs** cases increased 6%, for a total of 1,204 cases.
- ✓ **General Relief** cases increased 75%, for a total of 14 cases.
- ✓ **Medi-Cal** cases increased 9%, for a total of 5,478 cases.
- ✓ **CMSP** (County Medical Services Program) cases providing health care to indigents increased 28%, for a total of 824 cases.
- ✓ **IHSS** (In Home Supportive Services) cases increased 4%, for a total of 1,607 cases.

DSS estimates that it is providing some sort of public assistance to 1 in 5 Lake County residents. Its caseload has changed to include people who previously worked in construction, real estate, and related fields. Many have college or advanced degrees and good work histories. Like the "new homeless" discussed below, they are in shock. Many have lost everything they've worked for – jobs, homes, savings, and self-esteem. They are experiencing the stages of grief, while coping with poverty. DSS has created specialized job clubs for these clients.

As discussed below, it takes more than *four times* the average 2008 CalWORKs + Food Stamps benefit to meet the needs of a family with one adult, one preschooler, and a school-age child. In other words, this basic benefit cannot even bring a family up to the FPL. Even a slight wage increase can cost a family its entire benefit, creating an insurmountable cycle of dependency and despair ("How Much is Enough in Your County?" The 2008 California Family Economic Self-Sufficiency Standard, Insight Center for Community Economic Development, May 2008).

*Free and reduced lunch rates:* The sharp rise in children's Free and Reduced Lunch eligibility during the 2008-2009 school year substantiates the increase in the County's economic distress.

Name of District	Total Enrollment <sup>1</sup>	Homeless <sup>2</sup>	Free/Reduced <sup>3</sup>	
			#	%
Kelseyville Unified	1,789	80	1,470	64% <sup>4</sup>
Konocti Unified	3,069	370	2,512	80.1% <sup>4</sup>
Lakeport Unified	1,709	58	855	51.7%
Lucerne Elementary	277	34	232	76.6%
Middletown Unified	1,895	11	492	27.3%
Upper Lake Union Elementary	536	31	413	74.8% <sup>4</sup>
Upper Lake Union High	434	60	284	81.4% <sup>4</sup>
LCOE	95	23	99	73.3%

<sup>1</sup> 2007-2008 CDE. <sup>2</sup> June 30, 2008 Consolidated Applications. February 2009 Report, 10/2008 CBEDS.

### III. Contributors to Poverty

1. Weak Labor Market and Low Wages. Employment in Lake County is dependent on an unbalanced job market. About 75% of local businesses are very small, with only 1-4 employees. In 2007, at least 43% of businesses were in the service sector, followed by retail trade (18%) and construction (12%). All three of these sectors have been severely affected by the recession. We are seeing empty storefronts on our main streets. Much of the service sector is concentrated in hospitality and tourism, also lagging due to the recession. Service and retail jobs tend to be low-paying, part-time, and seasonal, without benefits or stability. Some employers change their employees' work schedules every week. Employees never know what they're going to earn or when, making budgeting and child care arrangements very difficult (Center for Economic Development, Lake County 2008-2009 Economic and Demographic Profile, CSU, Chico).

1a. Median income and average annual wage. Our median household income is \$38,113, about 63% of the state median (U.S. Census, SAPE). However, per capita personal income was only \$28,993 (U.S. Department of Labor, Bureau of Economic Analysis 2007). In 2007, the average annual wage (i.e., not investment, social security, or assistance) was \$32,022. The California average wage was \$50,182. However, there is a huge disparity between rural and urban California. The metropolitan average wage was \$50,484, but the non-metropolitan average wage was \$33,137 (U.S. Department of Commerce, Bureau of Economic Analysis, Table CA34 – Wage and Salary Summary). California's minimum wage is \$8.00/hour for 2009 (assuming full-time employment of 2,080 hours), generating an annual pre-tax income of \$18,720, which is 58% of the average annual wage or 64% of the median income.

1b. Self-Sufficiency Income. The most recent Self-Sufficiency Standard for California strongly suggests that neither the median household income nor the average annual wage allow a family to be independent of welfare and all other public subsidies. The *Self-Sufficiency Standard* focuses on economic independence, i.e., what is the *minimum income* required to raise a family adequately without public or private assistance? It provides separate estimates for different family structures (see below)

because family size and composition affect both cost of living and income. The *Standard* is based on the costs of each basic need (housing, taxes, transportation, child care, etc.), not just food. It is calibrated to local conditions and is different for each County. For example, Lake County residents commonly heat with propane or wood, both of which cost more than natural gas in used in urban areas. Low-Income Home Energy Assistance Program ("LIHEAP") subsidies are quickly used up each winter.

The *Self-Sufficiency Standard for California* was last updated in 2008. Although the median housing cost has dropped to about \$253,000, the prior surge in local housing prices did outstrip other components of the *Standard's* cost of living analysis. The *Standard* provides minimum incomes for 70 different family structures (combinations of adults and children, by age), based on data from multiple sources, e.g., the U.S. Census Bureau, Department of Agriculture, et al. For a family of three (one adult, one infant, and one preschooler), the *Standard* calculated that an income of \$3,853/month or \$46,230/year in 2008 dollars is the *minimum* required for self-sufficiency. The adult in this family must earn \$21.89/hour, working a full-time job at 2,080 hours/year. The current median income of \$38,113 equals \$18.32/hour. Even when the local economy was growing, many families in Lake County could not earn self-sufficient wages. Families and individuals require stable, sustained supports to survive the current economy and prepare themselves to benefit when prosperity returns. The self-sufficiency income required for a family of four at 2005 dollars (\$43,722) exceeds the 2007 average wage (\$32,022) by \$11,700.

Based on Census 2000, the structure of Lake County families with children living below the poverty line is:

- ✓ 54.9% of the families headed by single women with children under 5 were living below poverty.
- ✓ 22.5% of families living below poverty were headed by single men.
- ✓ Only 12.5% of families living below poverty were headed by married couples.

Using the *Standard* to match self-sufficiency income with family structure, in 2008:

- ✓ A family of 3 (single parent with one infant and one preschooler) requires an income of \$46,230/year or 252% of the \$18,310 FPL income for 2009.
- ✓ A family of 3 (single parent with a preschooler and school-age child) requires an income of \$43,556/year or 238% of the \$18,310 FPL income for 2009. (The slightly lower requirement may be due to lower child care costs for the school-aged child.)
- ✓ A family of 4 (two parents with one infant and one preschooler) requires an income of \$50,833/year or 213% of the \$22,050 FPL income for 2009.
- ✓ A single adult without children, however, only requires an income of \$19,764/year or 182% of the \$10,830 FPL for 2009

Child care costs, especially for younger children, continue to consume significant amounts of family income. Licensed child care costs have also risen from \$6,412 in

2005 to \$7,149 in 2007 for licensed, center-based care for one preschooler (The California Child Care Portfolio 2007, [www.rnnetwork.org](http://www.rnnetwork.org)). As discussed below, unsubsidized child care, plus housing can consume the entire annual income of a California minimum wage worker. When the costs of food and gasoline are added, it is clear that the gap between the FPL and what a family actually needs to live independently, albeit modestly, illustrates the challenges facing Lake County's low income community.

In the past 5 years, California's families experienced significant increases in basic living expenses, especially in child care and health care. Families in rural communities experienced a larger increase than those in urban areas. For example, a family of three in Lake County (adult, infant, preschooler) now must earn \$14,804 more than in 2003 for minimum self-sufficiency, an increase of nearly 48% from the baseline of \$31,426. The average wage, however, only rose 15.4% (from \$27,120 to \$32,022). ("How Much is Enough in Your County?" The 2008 California Family Economic Self-Sufficiency Standard, Insight Center for Community Economic Development, May 2008; <http://www.insightccd.org/uploads/cfes/sss-exec-summ-final-050908.pdf>).

Unfortunately, it is possible to work full-time and still be trapped in poverty. Working families with two full-time minimum wage workers earn too much to qualify for assistance, such as subsidized child care, but not enough to pay for them. Access to these supports is often determined by unrealistically low estimates of income "adequacy", including the one-size-fits-all Federal Poverty Level (FPL). As detailed above, the actual costs of a modest standard of living far exceed the FPL.

*Income Gap.* Women in Lake County earn less than men do. A full-time female worker earned \$24,028, while a full-time male worker earned 35,771, a difference of \$11,688 (almost a full-time minimum wage job) (Census 2000, DP-3). The pay gap reduces women's lifetime earnings and, therefore, their social security benefits and retirement income. Older women in California are more likely to live in poverty than older men. In 1997, the poverty rate for older women was nearly double that of older men (13% compared to 7%); older widows were 2.57 times more likely to be poor than older men (18%). Further, women are more likely than men to rely on Social Security as their main or only source of retirement income. As women from the baby boom generation begin to retire, these economic disparities may decrease due their higher earning power during their careers. Given the pay gap noted above, that older women in Lake County are also likely to experience these disparities [Aging California (from the 2005-2009 State Plan on Aging)].

For elders, the problem is even more severe. The median non-earned income for elders in California is \$16,172 (assuming full retirement). A homeowner without a mortgage needs a minimum of \$17,106 to live; the FPL for single individuals is \$10,272. Eligibility limits for food stamps, Medi-Care, LIHEAP, and other assistance are so strict that many elders can neither qualify for help nor live on what they have. Lake County's elders are cobbling together supports from Senior Centers, the LCCAA, Indian Health Services, and DSS, but cannot afford medicine *and* food *and* utilities ["Elders Living on

the Edge: The Impact of California Support Programs When Income Falls Short in Retirement", prepared for the *California Elder Economic Security Initiative (Cal-EESI)*, February 2008;  
<http://www.insightcced.org/uploads/publications/wd/Elders%20on%20the%20Edge.pdf>].

2. High Unemployment and Low Job Creation. Between 2000 and 2009, Lake County's labor force rose from 21,400 to 25,210. As of May 2009, County unemployment was 15.5%, with 3,920 people looking for work. The City of Clearlake reported 21.4% unemployment and 960 residents looking for work. Nearly 25% of the unemployed looking for work live here, where LCCAA's headquarters are located. Except for one small town, all sub-County areas report double-digit unemployment rates. In May 2008, the County's unemployment rate was only 9.6%, with only 2,340 people looking for work.

Job creation is not keeping up with the demand. In the first quarter of 2008 (the most recent available), only 966 jobs were created, while over 2,000 people were looking for work. It is likely that job creation dipped during the remainder of 2008 and early 2009, while the number of people looking for work nearly doubled. The net gain, if any, for this period is not available. Data from 2001-2005 found that Lake County had a **net gain** of only 210 jobs, meaning about 1 job for every 10 people looking for work. Most of the increases occurred in services; trade, transportation, and utilities; and government. None of these industries are high-paying, manufacturing-type jobs. That was a period of relative prosperity. This is a recession, so it is likely that Lake County is suffering an even larger net job loss.

3. Housing and Homelessness. Homelessness affects men, women, and children. Although it is considered primarily an urban problem, it is pervasive in rural areas as well. The root causes of homelessness are: (1) poverty; and (2) shortages of affordable [rental] housing, defined as costing less than 30% of one's income ([www.nationalhomeless.org/who.html](http://www.nationalhomeless.org/who.html)). There are many definitions of homelessness. Lake County is using the definition from the McKinney-Vento Homeless Student Assistance Act (within No Child Left Behind): "lack[ing] a fixed, regular and adequate nighttime residence". This definition is especially useful for rural areas, since most of our homeless are not in shelters, but are making do with other options.

The rural homeless population has its own unique character:

- ✓ Families, single mothers, and children make up the largest group of homeless in rural areas. *Since 2006, Lake County's identified homeless children and youth increased 49%, from 446 to 688. However, student enrollment dropped 5% from 10,325 to 9,804.*
- ✓ Rural homeless are more likely to be white, female, married, working, homeless for the first time, homeless for shorter periods.
- ✓ Homelessness among Native Americans and farm workers is largely rural.
- ✓ Rural homelessness is most pronounced in agricultural areas.<sup>1</sup>

Veterans are a visible subpopulation of the adult homeless. About 33% of homeless men are veterans; 98% of the homeless veterans are men. Rural areas have a disproportionate number of veterans. Lake County has about 8,000 veterans or about 12% of the total population (Veteran's Service Memorandum 2009).

Other factors affecting rural homelessness include:<sup>ii</sup>

- ✓ A structural or physical housing problem that forces families to relocate to safer housing, which is unaffordable
- ✓ Distance between low-cost housing and employment opportunities
- ✓ Lack of transportation
- ✓ Decline in home ownership
- ✓ Rising rent burdens
- ✓ Insecure tenancy due to changes in the local real estate market

([www.nationalhomeless.org/rural/htm](http://www.nationalhomeless.org/rural/htm))

Lake County's homeless shift among motels, cabins, travel trailers, and relatives' and friends' living rooms. Some live in cars or tents in campgrounds or orchards. Some live in wooden sheds, without water or heat, getting electricity via heavy-duty extension cords. Old seasonal resorts and derelict single-wide mobile homes have become year-round housing. Older youth "couch surf". Displacing children reduces their access to, and ability to succeed in, school. Lake County's high risk, low-resource environment amplifies the need for affordable housing, transitional housing, and housing assistance. ([www.nationalhomeless.org/rural/htm](http://www.nationalhomeless.org/rural/htm); Lake County McKinney-Vento Homeless Student Assistance Program, 2007-2008, 2009).

The current status of local socioeconomic problems contributing to homelessness are summarized below:

- *Lack of affordable housing.* Over 37% of the County's housing stock is over 30 years old. Redevelopment is eliminating dilapidated, but affordable, housing faster than new housing can be built. Section 8 supported housing is limited to 224 slots. The elderly or disabled have priority, not families with young children or victims of domestic violence. Nearly 42.2% of County renters pay 30% or more of their income in rent, a risk factor for homelessness ([www.nationalhomeless.org](http://www.nationalhomeless.org).)
- *Potential loss of housing.* Lake County has had a decades-long practice of allowing people to live long-term in hotel, resort, and recreational vehicle parks which were originally intended for short-term vacation occupancy. Often, the dwellings are run-down motels, tiny resorts, and travel trailers. Although inadequate (often without utilities, water, sewer, appliances, or insulation), they do offer shelter. The Board of Supervisors is contemplating closing these options, due to extensive health, safety, and code concerns. The increasing demand for rental housing coupled with rising unemployment is creating competition for the available, decent low-income housing. Removing these options is likely to further increase the demand for shelter, transitional housing, and permanent low-income housing. In addition, code abatement enforcement is resulting in the "red-tagging" of homes (designating them



inhabitable) and the forcible eviction of their occupants. If water is shut off, the dwelling can be red-tagged, as well.

- *Poverty*. As discussed above, many Lake County families do not earn enough to support themselves, however modestly. Housing and child care can consume most, if not all, of their income. One set-back can cost a family its home, with negative effects on health, hygiene, employability, mental health, and family stability. Each of these effects then becomes a cause of poverty, trapping the family in a downward spiral.
- *Rising Foreclosures*. Currently, there are 892 “distressed” properties (bank-owned, in foreclosure, or pre-foreclosure), but only 357 voluntary listings, a difference of 250%. The distressed properties are depressing sales prices and values. Too many homeowners, including young families in their first homes, owe more than the house is worth. They are at risk of homelessness, while other young and older professionals have already experienced it. These “new homeless” are in shock and don’t know how to access supports, such as the LCCAA.
- *Violence*. Family violence is correlated with homelessness, as victims flee home to escape the abuse. In 2007, 1,070 children were referred to County Child Welfare Services (“CWS”), a rate of 82.2 per 1,000, 167% of the state rate of 49.2 (CWS, Outcomes System Summary for California, Jan. 2009). In 2007, domestic violence comprised 63% of reported crimes against persons (Sheriff’s Report, 2008).
- *Lack of emergency shelter*. Unlike urban areas, Lake County has no emergency homeless shelters. The LCCAA operates the County’s only transitional (90 day) housing. Its 5 units serve about 22 families/year. In 2008, the CAA received 2,245 referrals for low income housing and shelter. Lake Family Resource Center (“LFRC”) operates our only domestic violence shelter, housing up to 18 women and children. It served 161 women and children in 2008. The Safe House for homeless, runaway, and throwaway youth can only shelter six youth. It opened in 2009 and is running full or near-full.
- *Fair Market Rent*. Lake County has had affordable rental housing, but rising foreclosures have driven rents up due to rising demand for rentals, a pattern seen nationwide. Since 2000, the Fair Market Rent (FMR) for a 2-bedroom dwelling in Lake County has risen 44%. At 30% of Adjusted Median Income (the standard for affordability per Housing and Urban Development), a family should only pay \$13,830 in rent. The 2008 FMR for a 2-bedroom in Lake County is only \$831 or \$9,972. The annual income needed to afford FMR is \$32,840, almost exactly the household median income. To afford FMR for a 2-bedroom, a family must earn 117% of that median income. However, 57% of renters are unable to afford a 2 bedroom at FMR. The calculation is bleak for minimum wage earners (at the California minimum wage), who must work 79 hours/week to afford the FMR for a 2-bedroom, requiring 2 full-time wage earners per family. At the estimated mean renter wage of \$10.51/hour, the wage earner must work 60 hours a week or the family must have 1.5 FTE workers (National Low Income Housing Coalition, *Out of*

*Reach 2007-2008*, <http://www.nlihc.org/oor/oor2008/>). As noted, child care and housing can consume a low-income family's entire annual income.

4. Low Educational Attainment. High school graduation rates are powerful predictors of a person's future. High school graduates, as a whole, have a better chance at a good life than high school drop-outs. Educational attainment is "one of the most important determinants of [their] life chances in terms of employment, income, health status, housing, and many other amenities. . . . Even with similar schooling resources, educational inequalities endure because children from educationally and economically disadvantaged populations are less prepared to start school. They are unlikely to catch up without major educational interventions on their behalf." (Levin, J., Belfield, C., Muenning, P. & Rouse, C. The Costs and Benefits of an Excellent Education for All of America's Children, prepared under grant support from Lilo and Gerry Leeds to Teachers College, Columbia University, January 2007, p. 2). These include quality early education programs for all at-risk children, which increase high school graduation rates (Fight Crime: Invest in Kids, <http://www.fightcrime.org/releases.php>).

Graduation rates are powerful predictors of a person's future and life time earnings. Male high school graduates earn \$117,000 - \$322,000 more than male high school drop-outs. Female high school graduates earn \$120,000 - \$244,000 more than female drop-outs. With the exception of black males, male high school drop-outs earn substantially more than female high school graduates, however. A white female college graduate (BA) only earns \$1,700 more than a white male high school graduate. High school drop outs represent huge lost potential lifetime earnings, estimated nationally at \$320 billion (<http://online.wsj.com/article/SB122455013168452477.html>). Lower earning power translates to a lower tax base in the community

Despite their challenges, Lake County youth are at least slightly more likely to stay in school than their peers statewide.

- ✓ In 2007-08, 132 students dropped out, i.e., 4% of 3,252 students enrolled in 9<sup>th</sup> – 12<sup>th</sup> grades
- ✓ The County's 4-year derived rate was 15.8%; the State rate was 16.8%
- ✓ The County's 1-year derived rate was 4.1; the State rate was 4.3

5. Lack of adequate, affordable, quality child care. Child care includes infant, toddler, preschool, and school-aged care, including comprehensive after school programs. Child care alleviates poverty in three ways: (a) access to adequate, affordable care lets parents take and keep jobs; (b) parents with reliable child care are more likely to be reliable employees, increasing business productivity and job retention; and (c) quality early childhood education is directly linked to higher educational attainment and lower crime and welfare dependency, among other avoided costs.

As of 2007, Lake County had 791 licensed preschool spaces and 742 comprehensive after school spaces, a significant increase from prior years. There remains a significant

deficit of almost 60% of eligible preschoolers who are not being served and about 3,150 school-aged children (grades K-7) who are unserved. There is a chronic shortage of infant care. Looming state budgets cuts are likely to reduce subsidized child care, forcing many families to rely on Family, Friends, and Neighbors, rather than trained, educated, and supervised child care professionals. This trend affects the quality of care available to young children, especially at the critical preschool level.

Losing the capacity to provide quality early childhood education can entrench poverty in our community, due to both the lost earning power and increased costs associated with the lack of this resource. The minimum cost-benefit ratio of quality early childhood education is at least 2.62, exclusive of benefits to parents, schools, and the community. When such benefits are included, the return rises to at least \$7.16 for every dollar invested. When intangible benefits to victims of child abuse and neglect and crime are included, the benefit-cost ratio rises to 3.40 and the internal rate of return rises to 14.2%. Specific research-based benefits include:

- ✓ Higher levels of achievement on standardized reading and math tests
- ✓ Reduced need for special education
- ✓ Reduced rates of grade retention
- ✓ Better classroom behavior and socialization
- ✓ Children more likely to maintain a positive attitude toward school
- ✓ Higher high school graduation rates
- ✓ Higher college attendance rates
- ✓ Strong reduction in crime rates (juvenile and adult)

The quantitative benefits of quality preschool are confirmed by qualitative data from California kindergarten teachers:

- ✓ 95% agreed that children who attended preschool were better prepared for kindergarten than those who did not.
- ✓ 88% stated that they have to work on basic skills with children who did not attend preschool.

At the national level, teachers found other benefits of preschool, which reinforce the results found by the evaluation studies:

- ✓ 78% stated that children who had gone to preschool were less likely to be disruptive in class.
- ✓ 86% noted that the time required to cope with the disruptive behavior and learning deficits of children who were not ready for school had a negative effect on other children's progress.

These results may reflect the fact that children who have attended preschool have already successfully separated from their parents, learned to share and navigated the other myriad challenges of school, such as group interactions. They are school-ready.

"I've worked in California schools for over 34 years and have seen how children decide whether they are "good" or "bad" students as early as first grade. Give a 4-year old a play-based curriculum in a supportive environment, and you create a child who thinks of himself as a successful learner for the long term." – Jerry Cowdrey, M.S., Educational Psychologist, Newport-Mesa Unified School District.

(Source: Update to Lake County Children's Report Card, 2007, Chapter 4, pp.65-107, [www.dss.co.lake.ca.us](http://www.dss.co.lake.ca.us).)

The importance of quality after school care is increasingly well-understood. Quality care includes academic help, recreation/athletics, nutrition, homework help, and enrichment. Well-designed after school programs can supplement the academic day, adding 30-45 days worth of class time to a child's experience. For our homeless and highly mobile children, quality after school programs help them catch up on missed school work. Fun, food, and socialization help children develop socially and emotionally. Working parents benefit because they know their children are safe, happy, and supervised in the critical after-school period.

Threatened cuts to subsidized child care and to incentives for child care workers to pursue their educations threaten both the quantity and quality of the child care supply in Lake County. Losing access to quality child care jeopardizes the future educational attainment and income of the unserved children. This loss weakens the community's future economic base. The community loses its capacity to provide safe neighborhoods, with a wide range of enriched activities for all ages.

6. Alcohol and Other Drug Abuse. Lake County has chronically high rates of alcohol and other drug abuse, which have serious effects on the health, economic security, and well-being of affected individuals, their children, and the general community. Data collated in 2005 by Alcohol and Other Drug Services ("AODS") from multiple sources confirms the scope of the problem. For example, of California's 58 counties, Lake County ranks, per capita (1<sup>st</sup> equals best, 58<sup>th</sup> equals worst), as follows:

- ✓ 48<sup>th</sup> for drug arrests (FY 2001)
- ✓ 54<sup>th</sup> for alcohol violations, excluding Driving Under the Influence (FY 2001)
- ✓ 53<sup>rd</sup> for DUI arrests (FY 2001)
- ✓ 50<sup>th</sup> for alcohol-involved motor vehicle fatal and injury accidents (FY 2000)
- ✓ 49<sup>th</sup> for adult treatment admissions

In 2000, we had the highest rate of deaths in California due to alcohol and drug use. As of 2009, Lake County is estimated to have the second-highest drug-induced death rate in California (2005-2007 three-year average), although the estimate has a high relative standard error (County Health Status Profiles 2009, (<http://www.cdph.ca.gov/pubsforms/Pubs/OHIRProfiles2009.pdf>)). Substance abuse is a seemingly intractable challenge to Lake County's well-being.

The substance abuse problem directly contributes to high crime rates and costs. The

California Attorney General's Office found that 23% of adult misdemeanor arrests and 22% of adult felony arrests were for drug and alcohol offenses. Of the 196 adult felony arrests for drug and alcohol offenses, 110 or 56% were for "dangerous drugs". At the juvenile level, 71% of misdemeanor arrests were for drug and alcohol offenses; 16.5% of all juvenile arrests in Lake County were for drug and alcohol specific offenses.

The California Outcomes Measurement System confirms that substance abuse starts early in Lake County's residents. During FY 2007-2008, 52.6% of users in treatment in 2007-2008 started before age 15, an increase of 5.4% from 2003-2004. A startling 10.5% reported starting before they were even 12 years old. The Fall 2008 (most recent) California Healthy Kids Survey ("CHKS") found that 33% of 9<sup>th</sup> graders, and 53% of 11<sup>th</sup> graders reported alcohol use during the past 30 days. Such consistent use indicates a habit, not a hobby. Early onset of drug and alcohol use is associated with severe, chronic future addictive problems.

6a. *Prenatal Substance Abuse.* As the early onset data indicate, many Lake County women start their child-bearing years already compromised by substance abuse. Prenatal maternal substance abuse has serious consequences and, therefore, elicits very intense reactions from the providers and the community. Positive toxicology results can occur in the mother, the infant, or both. Only mothers receiving some form of public assistance, such as public insurance, are usually tested. Reported positive toxicology results do tend to unfairly stigmatize the poor, while failing to acknowledge the scope of the problem in other groups.

Further, current methodology does not screen for alcohol or prescription medication. Yet, the National Organization on Fetal Alcohol Syndrome reports that alcohol is the "leading known preventable cause of mental and physical birth defects".<sup>iii</sup> There is no known safe dose. Drinking during pregnancy can lead to Fetal Alcohol Syndrome Disorder ("FASD") in the children. FASD is associated with premature birth, low birthweight, facial deformity, hearing and vision problems, growth deficits, motor skills problems, slow reaction times, hyperactivity, memory and language problems, difficulties in school, and chronic impaired judgment. (National Association on Fetal Alcohol Syndrome, [www.nofas.org/MediaFiles/PDFs/fastsheets/everyone.pdf](http://www.nofas.org/MediaFiles/PDFs/fastsheets/everyone.pdf)).

Children of mothers who smoke during pregnancy are at risk of low birth weight, premature delivery, and Sudden Infant Death Syndrome.

The most serious consequences, however, are impaired judgment, impulsivity, and inability to learn from experience. These children simply cannot abstract common principles from different experiences to learn how to function safely and effectively. Because they cannot learn from experience, children growing up with FASD are likely to be disruptive in school (and fail), in trouble with the law (going to juvenile hall or jail), become sexually active early and unsafely, and, of course, find parenting incredibly challenging and frustrating. They are at risk of lifelong substance abuse and mental health problems. FASD has severe, long-term, intergenerational consequences [Substance Abuse and Mental Health Services Administration ("SAMHSA"), FASD

Center for Excellence, Fetal Alcohol Spectrum Disorders in Indian Country, March 2004]. Alcohol-exposed children without FASD may still have growth and neurological deficits, estimated to occur at three to four times the rate of FASD. *This suffering is unnecessary. FASD and alcohol-related disorders are 100% preventable.*

6b. *High local "tox pos" rates.* At least 35% of babies born in hospitals in Lake County test positive for one or more drugs ("tox pos"), so about 227 children/year are born at risk for neurological, behavioral, and other developmental deficits. The tox pos number understates the true level of risk because: (a) tox pos tests exclude alcohol; (b) the hospitals do not test all women; and (c) some women give birth at home to avoid being tested. Reports gathered by the assessment confirmed that Native American women are doing this. The 35% tox pos rates corroborate the estimated minimum FASD rate of 30% in Native American children derived from the caseload review.

Substance-exposed newborns may be difficult to care for and, therefore, more likely to be abused or neglected. Of the 68 infants served by the Lake County High Risk Infant Team in a twelve-month period (year not specified to protect privacy), 76% were drug exposed in utero, 44% of mothers tested positive at delivery, and 24% of the babies tested positive at birth. Of the mothers, 26% were teens, but 82% had family violence issues.

## 7. Health and Wellness.

[Please note that food security and nutrition, although directly related to health and wellness, will be discussed separately. Food costs and food insecurity have both risen sharply, creating challenges for the community and the LCCAA.] Poverty directly contributes to poor health, due to: (a) lack of access to health care, especially preventive care, which leads to serious health problems (e.g., untreated chronic ear infections lead to hearing loss and deafness); (b) poor nutrition, which stunts children's growth and is associated with overweight, cardiovascular disease, and diabetes; and (c) costly overuse of emergency rooms, among other outcomes. The cycle of poverty is self-perpetuating. Poor health contributes to poverty, as unhealthy individuals are less able to work, exercise, take care of themselves and their families, and participate in their communities and schools.

Lake County residents are at high risk of poor health outcomes:

- ✓ The entire County is a designated Medically Underserved Area and Health Professional Shortage Area and about half of the County is a designated low-income Health Professional Shortage Area. The entire County is a designated Mental Health HPSA (US Department of Health and Human Services, Health Resources and Services Administration, <http://bhpr.hrsa.gov/shortage/>).
- ✓ Lake County has the highest crude death rate in California, at 1,232.6 deaths/100,000 residents compared to the California rate of 629.7 deaths/100,000.
- ✓ Lake County has the highest crude death rate in California from all cancers, at 294.7, compared to the California rate of 145.9 and the San Benito County rate

- of only 104.2, a factor of 2.8 to 1.
- ✓ Lake County has the highest crude death rate in California from lung cancer, at 94.6/100,000, compared to the California rate of 35.4/100,000 and 26.6 in Imperial County, a factor of 3.6 to 1.
- ✓ Only 4 Counties had a higher age-adjusted death rate from lung cancer; Lake County's rate was 61.5, compared to the California rate of 39.2.
- ✓ Lake County ranked 44<sup>th</sup> of the 58 Counties (with 1 being the best) for age-adjusted deaths from coronary artery disease.
- ✓ Lake County's has the highest crude death rate in California for chronic lower respiratory disease, at 102.4/100,000, compared to the California rate of 34.3/100,000 and the Imperial County rate of 23.3, a factor of 4.4 to 1.
- ✓ Lake County's age-adjusted death rate due to accidents is the second-highest in California, at 75.5/100,000, compared to 30.4/100,000. Lake County had the highest crude death rate from accidents in California, at 83.2/100,000.
- ✓ Lake County ranked 38<sup>th</sup> of the 58 counties for births to adolescent mothers (aged 15-19), at 40.6/1,000 births, compared to the state rate of 37/1,000 births.
- ✓ Lake County ranked 45<sup>th</sup> of the 58 counties for births to mothers receiving late or no prenatal care, at 25.4%, compared to the California rate of 14.9%.
- ✓ Lake County ranked 50<sup>th</sup> of the 58 counties for births to mothers with "adequate/adequate plus" prenatal care, at 66.3/100 live births, compared to the California rate of 78.5/100 live births.

However, the age-adjusted AIDS case rate is relatively low, at an average of 1.3 new cases from 2005-2007, ranking us 17<sup>th</sup> in the state overall. Further, Lake County slightly exceeded California's rate for breastfed infants, at 88.1/100 births, compared to 86.5 per 100 births. (All data from County Health Status Profiles 2009, <http://www.cdph.ca.gov/pubsforms/Pubs/OHIRProfiles2009.pdf>. Statistically "unreliable" estimates were excluded from this discussion, e.g., infant death rates.)

7a. *Health status and poverty.* The UCLA Center for Health Policy Research *healthSNAPSHOTs* compares health status for residents of Lake County below 200% of FPL to residents at 200% of FPL and above. They used the 2007 California Health Interview Survey results, so the following indicators do not reflect the effects of the recession on the health and well-being of Lake County residents. The following Table should be considered a "best-case" scenario.

Indicator	<200% FPL	≥ 200% FPL
Currently insured	86.2%	89.6%
General Health Status:		
▪ Excellent	▪ 18%	▪ 22.4%
▪ Very good	▪ 23.9%	▪ 35.3%
▪ Good	▪ 30.4%	▪ 26.5%
▪ Fair	▪ 21.8%	▪ 12.9%
▪ Poor	▪ 5.9%	▪ 3% <sup>1</sup>
Current Smoker (12 & older)	32.6%	16.5%

Binge drinking in past year	34.4%	33.5%
Food Security, i.e., not able to afford enough food	44.4%	0%
Ever diagnosed with diabetes or pre-diabetes	8.9%	7.9%
Ever diagnosed with asthma?	23.8%	17.1%
Body Mass Index – 2 level: Overweight or obese	53.7%	61.1%
Eat 5 or more servings of fruits & vegetables/day	38%	48.1%

Some of these results are to be expected. Lower income is strongly correlated with smoking, food insecurity, and lower overall health. However, the association between higher income and obesity was unexpected. The level of health insurance is also likely to be too high. The CHIS is a telephone survey, so it excludes both cell phone users and individuals too poor to have a telephone. Further, as people lose their jobs, they also lose whatever health insurance they may have had.

7b. *Diabetes prevalence.* Diabetes prevalence is becoming a health priority in the County and nation. Socio-economic status and public policy strongly influence diabetes prevalence, making it somewhat manageable. In California, more than 1 out of 10 adults has diabetes. From 1998 to 2007, the prevalence of diagnosed diabetes rose from 5.5% to 7.6%, a 38% increase in just 10 years. California also has the highest number of people in the nation receiving new diagnoses of diabetes. In 2007, about 29%, or nearly 1 in 3 adults in California had pre-diabetes, a condition that often precedes type 2 diabetes. From 1998-2005, gestational diabetes prevalence increased 60% in California, from 3.3% to 5.3% of hospital deliveries. Other studies indicate a consistent increase in diabetes among children and youth.

California's ethnic diversity contributes to the higher risk and prevalence of type 2 diabetes. The state's population includes sub-groups at higher risk, such as Latinos and Native Americans. Total health care and related costs for the treatment of diabetes in California is about \$24.5 billion each year. As such, diabetes in California represents a significant and growing economic drain for families, employers, and communities, especially during these difficult economic times.

Key trends in diabetes prevalence in California include: (i) a correlation between high prevalence and being uninsured, especially among Latinos; and (ii) growing prevalence of diabetes in young adults (aged 18-44). Young adults tend to be vulnerable to diabetes complications when they should be in their prime due to: (i) high rates of concurrent tobacco use (20%) and heart disease (8%); (ii) high rates of "un-insurance"; and (iii) low rates of relevant services, e.g., eye exams and flu shots.

Diabetes can result in blindness, kidney failure, and limb amputations. Uncontrolled diabetes can require dialysis. Many patients require hospitalization, yet many of these



expensive admissions are preventable. Statewide, admissions for short-term complications of diabetes rose 5.02% from 1997-2003, while admissions for long-term complications rose 8.18% during the same time frame. Lower extremity amputations rose 4.9%. (Preventable Hospitalizations in California: Statewide and County Trends (\*1997-2003), Office of Statewide Health Planning and Development, November 2005.) In other words, diabetes drains resources from individuals, families, the community, and the health care system. Just one year of health care for one Native American diabetic totals at least \$13,243 (Indian Health Services). One year of in-center dialysis costs \$70,000/year, while a year of nocturnal dialysis costs about \$60,000.

Lake County residents, overall, should have equal or greater diabetes prevalence rates and risks, especially given the "poverty diet" (starch, fast foods) which is linked to overweight/obesity, high smoking rates, and alcohol and other drug use. Overweight/obese individuals have a much greater risk of developing type 2 diabetes and cardiovascular disease than individuals of normal weight. Even a modest weight loss of 5-7% can prevent or delay the development of type 2 diabetes among adults with pre-diabetes by 58%. Further, individuals consuming fewer than 5 servings of fruits and vegetables per day are at higher risk of developing a variety of chronic diseases, less likely to have a healthy weight, and more likely to develop diabetes. (Diabetes in California Counties, issued April 2009 by California Diabetes Program, <http://www.caldiabetes.org>.) Because it is so intertwined with other conditions, however, addressing diabetes is highly cost-effective. For example, activities that promote healthy weight, fitness, and good nutrition help control or prevent not only diabetes, but also cardiovascular disease and other conditions, including depression.

*7c. Mental Health.* The California Department of Mental Health prevalence rates confirm the link between serious mental health needs and poverty. At 100%-199% of FPL, at least 9.22% of Lake County residents needed mental health services. At <100% FPL, 12.35% of residents needed such services. The prevalence of "serious mental illness" for all households, however, was only 6.9%.

Consistent with the pattern of outcomes for higher educational attainment, needs were highest among non-high school graduates (10.59%), dropping to 9.16% for graduates, and only 4.19% for college graduates. Prevalence rates showed two age spikes: (a) 12.35% among Transition Aged Youth (18-20); and (b) 13.18% among adults aged 35-44. Gender differences were significant, with female prevalence (11.31%) nearly double the male prevalence (6.94%). These "worst-case" numbers require both a mental disorder and functional impairment. (CA Dept. of Mental Health, [http://www.dmh.ca.gov/Statistics and Data Analysis/Definitions.asp](http://www.dmh.ca.gov/Statistics_and_Data_Analysis/Definitions.asp)).

*7c(i) Anxiety.* Other indicators of mental distress in the population include disturbing rates of anxiety and depression among youth. Multiple sources confirm that Lake County's children are suffering from disturbing levels of anxiety and distress at ever-younger ages. LCMH reports its top three diagnoses in children aged 5-11 are: (a) mood disorder; (b) adjustment disorder; and (c) Attention Deficit Hyperactivity Disorder

("ADHD"). Mood disorder is linked to the anxiety/depression spectrum (mild to moderate vs. pervasive anxiety and dysthymic disorder vs. clinical depression. Adjustment disorder is a short-term (6 months) disorder arising from a child's emotional response to life events such as divorce, moving, etc.

Anxiety may be grossly underdiagnosed. For example, individuals with anxiety are easily overwhelmed and their symptoms may look like PTSD (flashbacks, trigger events, nightmares, etc.). Anxiety may also appear to be ADHD; however, ADHD manifests across multiple domains, e.g., home and school. If symptoms occur in one domain, but not another, the true problem may be anxiety. Children may be trying to soothe themselves with behaviors that disperse the anxiety. Despite these limitations, LCMH's diagnoses of anxiety more than tripled between 2000 and 2006.

**7c(ii) *Depression – "so sad and hopeless"***. The California Healthy Kids Survey asks children in 7<sup>th</sup>, 9<sup>th</sup>, and 11<sup>th</sup> grades whether, during the past year, they felt ". . . so sad and hopeless every day for 2 weeks or more that they stopped doing their usual activities. . ." This question is considered by the CHKS to be an indicator of depression risk. Depression affects about 4% of teenagers each year nationwide. It increases the risk for suicide, which has become the third leading cause of death among 15-24 year olds. Depression interferes with normal development. It is "associated with compromised educational, social, and emotional outcomes." Youth suffering from depression may engage in risky or thrill-seeking behavior, e.g., alcohol, drugs, sex (or violence). They may have trouble with school, grades, family, and friends. These youth may be self-medicating with drugs, suggesting that drug treatment providers should consider the role of depression in a youth's substance abuse (CHKS Technical Report, Fall 2008).

Lake County youth report depression at much greater rates than the national standard of 4%. The percentage answering "yes" to the CHKS question is consistently high.

	<b>2002</b>	<b>2004</b>	<b>2006</b>	<b>2008</b>
<b>7<sup>th</sup> graders</b>	31%	28%	30%	30%
<b>9<sup>th</sup> graders</b>	38%	39%	37%	36%
<b>11<sup>th</sup> graders</b>	40%	39%	34%	38%

Depression in children is very treatable. Brief, temporary interventions are preferred and successful.

**7c(iii). *Maternal depression.*** Although LCMH is not formally tracking depression in mothers, staff report high levels of depression among women of childbearing age (15-44). One normed survey of young mothers receiving Family Resource Center services found that at least 50% were depressed. This risk factor increases the risk of perinatal substance abuse (discussed above), as depressed individuals self-medicate to alleviate their suffering or may be unable to resist the pull of old habits, even though they want to have healthy babies.

7d. Dental care. Good oral health is fundamental to individual well-being, including health, appearance, and even employability. It is essential for children's healthy development and success in school. A child who can't eat, can't grow a healthy brain and body. Poor oral health status is associated with higher rates of cardiovascular disease. People with missing or chipped teeth are less likely to be employed. Maternal lack of oral health is linked to premature labor, low birth weight babies, and neonatal death. Both mothers and children may experience chronic infections, including pneumonia, leading to overmedication and antibiotic resistance.

Preventive oral health care directly promotes children's well-being. It is also cost-effective. Children with advanced decay and other problems often require anaesthesia for treatment, so one child receiving subsidized care can cost \$10,000. Extreme cases may run \$25,000. Avoiding the cost of treating even a few children with serious dental disease could fund entire prevention and education programs, such as Lake County's Dental Disease Prevention Program which has just been cut from the State budget.

## **8.0 Nutrition and Food Security.**

As the above discussion indicates, Lake County residents are at very high risk of poor health in multiple areas. However, good nutrition and physical exercise are key interventions that address multiple risks, including overweight/obesity, cardiovascular disease, diabetes, and sub-clinical depression.

Obesity and overweight are public health challenges at the national, state, and local levels. Nationally, in 1976-80, only 6% of children aged 6-17 were overweight. By 2001-2002, 17% were overweight, rising to 18% in 2003-2004. The Lake County MCH 5-Year Needs Assessment 2004 prioritized this issue, as it is both a consequence of, and a contributor to, other health indicators, e.g., diabetes and cardiovascular disease. Obesity may be linked to the low-protein, high-carbohydrate, high-fat "poverty diet". It is endemic to rural areas. [Note: Overweight is defined as a body mass index ("BMI") at or above the 95<sup>th</sup> percentile of the 2000 Centers for Disease Control and Prevention BMI-for-age growth charts. BMI is calculated as weight in kilograms divided by the square of height in meters.]

Weight problems in childhood are often a precursor to a lifetime of trouble, in areas such as physical health, self-esteem, rates of bullying, social acceptance, employability; productivity, and morbidity. The super-thin female and super-buff male body images promulgated throughout our society create unrealistic expectations. Children, youth, and adults alike hurt themselves trying to keep up, relying on starvation diets, anorexia and bulimia, and/or early steroid use (to bulk up). There are pro-ana (pro-anorexia) sites on the internet. Anorexia, bulimia, and other behaviors also have roots in the desire to be able to control something in life; food intake and body shape are within even a child's control. Other consequences include: (1) using appetite suppressants, such as smoking, diet aids, or methamphetamine, which are health risks, including addiction; (2) seeking acceptance through sexual promiscuity, also a health risk; and (3)

a self-perpetuating cycle: the child feels sad or bad and self-medicates with more food.

8a. *Juvenile Overweight and Obesity.* According to the 2007 California Pediatric Nutrition Surveillance reports, 13.2% of Lake County children under 5 years old are overweight, 13.9% are at risk of being more than 2 years overweight, and 15.6% are two years or more overweight. Nationally, 13.9% of children under 5 are overweight, 16.4% are at risk of being more than 2 years overweight, and 14.9% are two years or more overweight. Older children and youth aged 5-19 are at higher risk, with 15.4% at risk of being more than 2 years overweight, and 21.4% being two years or more overweight. National data do not appear to be available for these age groups. Assuming the results for children under age 5 are consistent at both the County and national levels, it is possible that Lake County children and youth are doing at least as well as their peers nationwide (<http://www.dhcs.ca.gov/services/chdp/Documents/PedNSS/2007/>).

The CHKS asked students in the 7<sup>th</sup>, 9<sup>th</sup>, and 11<sup>th</sup> grades to provide their height and weight; the CHKS then calculates their BMI. Fifth graders are asked whether they think they are too fat, too skinny, or about right and whether they are trying to lose weight. They also report whether they are trying to lose weight. Body image and weight troubles start early.

- ✓ In 2002 and 2006, 72% of 5<sup>th</sup> graders thought they were "about right", rising to 75% by 2008.
- ✓ In 2002, 37% of these 10-year olds were trying to lose weight and that by 2008, 49% were "trying to lose weight"

The CHKS age groupings are comparable to the national groupings. When the percentages of youth at risk of overweight or overweight are totaled, however, Lake County exceeds the national average.

	2002			2004			2006		
	7 <sup>th</sup>	9 <sup>th</sup>	11 <sup>th</sup>	7 <sup>th</sup>	9 <sup>th</sup>	11 <sup>th</sup>	7 <sup>th</sup>	9 <sup>th</sup>	11 <sup>th</sup>
<b>At risk of overweight</b>	n/a	18%	17%	19%	18%	16%	20%	19%	18%
<b>Overweight</b>	n/a	8%	11%	11%	14%	14%	22%	14%	14%

Note: 2008 data unavailable.

Rates of obesity are higher in low-income non-Hispanic white teens than in teens in more prosperous families. Low-income whites are a large local population group, which strongly suggests that Lake County youth are at enhanced risk of being overweight. However, our growing Latino population is also at risk of overweight. Statewide, more than 1 of 3 Latino adolescents is overweight or at risk. The rate is twice as high among males as females. This population group is less likely to be physically fit, as well. Overall, 10% engage in no physical activity at all, with 13% of Latinas and 6% of Latinos inactive. These prevalence rates suggest both a potential problem and an opportunity to intervene with a vulnerable populace (Rodriguez, M., Kane, M., Alonzo-Diaz, L., & Flores, G. UCLA Healthy Policy Fact Sheet, UCLA Center for Health Policy & the Latino

Coalition for a Healthy California, April 2005, [www.healthpolicy.ucla.edu](http://www.healthpolicy.ucla.edu).) .

*8b. Adult overweight and obesity.* Lake County adults are at higher risk than other Californians of being overweight or obese. At least 30,000 individuals or about 62.7% of the estimated population are overweight/obese, ranking us 15<sup>th</sup> in the state.

*8c. Neighborhood safety and overweight.* There is an inverse relationship between neighborhood safety and overweight. The National Institute of Human Development's Study of Early Child Care and Youth Development interviewed parents/families of 768 children. Parents were asked to rate neighborhood safety and results were divided into quartiles with the first quartile being the most unsafe. Those results were compared to the children's BMI. The researchers found that 17% of children living in the first quartile were overweight, compared with 10% in the second, 13% in the third, and only 4% in the safest areas. Factors such as maternal education or marital status, racial or ethnic backgrounds, and after school participation did not affect the results. The correlation may be due to parents' attempts to protect their children from harm by keeping them indoors. It may also be due, however, to other effects of poverty, including low quality/expensive food supplies ("nutritional deserts" in low-income areas) and fewer places to play (Lumeng, J., et al., Archives of Pediatrics and Adolescent Medicine, 2005.)

Researchers are analyzing links between obesity and other factors. These include changes in children's activity levels and fitness due to television, computers, and video games. Other factors include transportation: are children walking or biking to get around or are they being driven? Child care and after school programs could have very positive effects on fitness by providing sports, dance, yoga, and other activities. Interestingly, younger children actually spent 73 minutes more per week in organized sports and outdoor activities in 1997 compared to 1981. However, the ten years from 1997-2007 have seen a digital revolution, so children's activity levels should be re-examined (Sturm, R., *Childhood obesity – What we can learn from existing data on societal trends, part 2. Preventing Chronic Disease*, Vol. 2: No. 2, April 2005, [http://www.cdc.gov.pcd/issues/2005/a\[r/04\\_0039.htm](http://www.cdc.gov.pcd/issues/2005/a[r/04_0039.htm)).

*8c. High costs of healthy foods.* Diets have changed to a number of economic, social, and political factors. Calories consumed per capita were relatively static from 1970 until the mid-1980's. They started to rise thereafter and the rise is almost exclusively from carbohydrates. Concurrently, people started eating away from home. By 2001, 47% of food dollars were spent on food away from home. These foods tend to be more energy-dense, with more fats and sugars. USDA researchers calculated that if food away from home was comparable to food consumed in the home in 1995, Americans would actually have reduced their calorie intake by 197 calories/day and reduced their fat intake to 31.5% of total calories (Sturm, et al.)

The Consumer Price Index and other studies confirm that the cost of fresh fruits and vegetables has risen much more steeply than costs of soda, fats, and sugar. In other words, it is cheaper to eat badly than to eat well. Over time, low-income individuals

eating the high-starch, high-fat “poverty diet” become malnourished. Their health is compromised, as is their age-appropriate development. They are at higher risk of outcomes such as obesity, diabetes, and cardiovascular disease.

Working families and small families have to balance the time and cost to purchase and prepare nutritious meals at home against perceived benefit. Prepared foods may seem cheaper when compared with the time costs of cooking and cleaning up at home. This is particularly true when consumers lack information about their food’s nutritional value. The phenomenon is a type of market failure: when quality is important but the buyer cannot assess it, the buyer will rely on price, portion size, and other factors.

One key economic trend points to a reason for unhealthy eating patterns: relative price changes. Using the 2002 Consumer Price Index, which has a baseline of 100 set at 1982-1984 prices, researchers found that:

- ✓ By 2002, the Consumer Price Index increased to 180 from the baseline.
- ✓ The price index for fresh fruits and vegetables increased to 258.
- ✓ Sugars, sweets, fats, and oils became relatively cheaper, with lower price increases.
- ✓ Soft drinks increased only to 126, becoming among the cheapest items.

8d. Unhealthy eating habits. The Fall 2006 CHKS asked students about their daily eating behaviors, from soda and french fries to 100% fruit juice or fruits and vegetables. As students got older, they reported slightly less health habits: 56% of 7<sup>th</sup> graders, 55% of 9<sup>th</sup> graders, and only 48% of 11<sup>th</sup> graders reported eating 5 or more portions of fruits and/or vegetables daily. These eating patterns may reflect family culture, lack of time, the effects of TV advertising, and simple convenience. These patterns also offer significant room for improvement.

8e. Food Security (Hunger). Food insecurity is not limited to individuals whose household income was below 200% FPL. As the discussion on self-sufficiency income demonstrated, Lake County residents living in households well above the 200% FPL may struggle to make ends meet. Working poor are caught in the middle, unable to earn enough to support a family, but making too much to qualify for aid. In Lake County, at least 4,280 adults live in food insecure households, with a food insecurity rate of 26%.

Food assistance programs are underutilized. In 2008, about 54% of individuals eligible for Food Stamps were not participating and 24.5% of children eligible for free/reduced lunch were not participating (California Food Policy Advocates 2008, Lake County Nutrition Profile, <http://www.cfpa.net>). The worsening economy may increase both eligibility and utilization as people seek to stretch scarce personal resources.

During the critical prenatal and early postpartum period, mothers and children must be well-nourished for optimum health outcomes. The primary source of reliable food and nutrition education for this group is Women, Infants, and Children (“WIC”). WIC is a

federally-funded food voucher and nutrition program for low income ( $\leq 185\%$  FPL), pregnant, lactating, and postpartum women, plus infants and children up to age 5. It provides access to relatively healthy foods: juice, milk, even fresh produce from the local farmers' markets. WIC also provides support for breastfeeding, parent education, counseling, and support. Because WIC links food distribution to health care, participation in WIC increases the likelihood of regular prenatal and pediatric care. WIC has reduced its service centers, yet the annual average number of women served has increased steadily, from 424 in 2000 to 537 in 2006. Despite these impressive numbers, only 56% of eligible women are being served (<http://www.wicworks.ca.gov/>). With more funding, WIC could substantially improve maternal and child health throughout Lake County. As of 2006, Lake County's WIC program was serving 476 infants, 1,088 children aged 1-4, and 537 women. We expect these service numbers to increase, as incomes drop. Unfortunately, the rising costs of food have reduced the buying power of WIC vouchers.

## **9.0 Recreation.**

Although Lake County and the two incorporated cities have invested in a beautiful network of public parks, there are no public recreation programs. There are no YMCAs or YWCAs. The national organizations of the Boys and Girls Clubs and Big Brothers/Big Sisters forced our local chapters to close, by imposing financial reserve and caseload requirements far in excess of what our small, poor community can achieve. Community groups have stepped up to create small sports leagues and other activities. There are only two public pools in the entire County, one in Lakeport and one in Middletown. Neither is readily accessible to the Clearlake area, the County's largest population center. Public-private partnerships developed and operate the Westshore Community Pool and the Westside Community Park, both located in Lakeport. Clearlake just renovated its downtown skate park. The County's natural resources could provide year-round recreation, but we need trained leaders, equipment, insurance, and other resources to offer accessible programs for low-income residents. Affordable recreation programs that offer options for different age groups directly contribute to quality-of-life: they provide exercise, socialization, reduce isolation, and foster community unity.

## **10.0 Transportation.**

No matter how rich the resources, they might as well not exist if residents can't get to them. The County's size, geography, and scattered population centers create barriers to accessing work, education, child care, recreation, services, and shopping. Distances between towns mandate the development of local services, rather than larger, centralized service hubs. Working parents often travel long distances on less-than-ideal roads to get to work, school, assistance, and child care.

With regular gasoline now costing at or about \$3.00/gallon, residents are factoring gas costs into their priorities. Child care and other service providers report that some participants are having difficulty maintaining consistent attendance in programs. The

specified reason is "gas costs". Unfortunately, public transportation is often not a feasible option, as detailed below.

*10a. Lake Transit Authority.* Lake Transit Authority ("LTA") began operating in 1996-97. LTA started with five routes and has expanded to 8 routes, including one to Ukiah. It operates regional routes, linking Lakeport, Clearlake, and the major towns. Local fares are kept low. It also provides Flex-Stop and other help for the disabled and elderly. A random sample of residents contacted by telephone found that 53.8% of those who needed public transportation were unable to get it (Applied Survey Research, Lake County Community Assessment Project, *Lake County Health Needs Assessment 2002*, p. 241). LTA projects about 240,000 passenger trips for 2006-2007. As gasoline costs rise and the reality of climate change is transformed into action, it is highly likely that more people will ride LTA.

*10b. Other transportation sources.* The CAA, like other local agencies, transports program clients or provides bus passes or pays for emergency gasoline. Bus passes are provided for clients at the Transitional Shelter, as well as clients with disabilities or seniors. All transportation support is contingent upon available funding. Other agencies' contributions include Healthy Start, which accounted for 12,295 miles in 2005-2006, down from 17,370 in 2004-2005.

*10c. Private automobiles.* For Lake County families, the privately-owned automobile remains the most common means of getting to and from employment, recreation, shopping, and services. Many residents cannot afford to buy, maintain, license, and insure a reliable car. A flat tire or worn out brakes can be the difference between making it to work on time or being fired for being unreliable. Families juggling multiple jobs and ever-changing shifts absolutely need reliable transportation, yet may be less likely to have it. Gas costs, family cohesion, and growing environmental concerns should be factored into planning for housing, child care, other services, and recreation. Utilizing already-developed areas and locating services and shopping near transit will reduce dependence on gasoline, stabilize providers and families, and add value to developments and businesses.

## **B. Community Resources and Services, Other than CSBG.**

This section will discuss non-CSBG resources available to ameliorate poverty and our established linkages with them, according to the categories discussed above, e.g., housing, employment supports, health, etc. Some partners, such as DSS, provide services and supports in many areas, from employment support to food to housing. When a partner has been covered in one area, it will only be listed in the other relevant areas.

### **1. Services focused on ameliorating poverty.**

*a. Department of Social Services. (DSS).* DSS is the only agency, other than the LCCAA, with a mission directly focused on ameliorating poverty. DSS provides



temporary financial support (Temporary Assistance to Needy Families), food stamps (using Electronic Benefit Transfer cards to avoid stigma), Medi-Cal, welfare-to-work services (including job training and placement, subsidized child care to help families enter and remain in the work force while on and transitioning off TANF, supported housing (Section 8 vouchers) , and general relief. Its Child Welfare Services division attempts to reunify families and protect children, reducing children's exposure to violence and attempting to preserve healthy, intact families. Its Adult Protective Services division provides In-Home Supportive Services, which assist older and/or disabled adults to remain in their homes, living with dignity and independence. DSS contracts with The Arbor to provide a workforce development center (JobZone) and the youth resource center for youth aged 16-19 in families in Welfare-to-Work (MiZone) in the southshore region of the County.

The **LCCAA's relationship with DSS** is both formal and informal. We have MOUs in place, plus a long-term referral relationship. Specific agreements include: (i) DSS reserves 10 spaces in its Section 8 Housing program for Transitional Shelter graduates (when space is available); (ii) DSS has authorized the LCCAA to pre-clear clients for Food Stamp eligibility, saving time; and (iii) DSS downloads the LCCAA Resource Directory into its Eligibility Workers' computers for their use in case planning.

b. Lake Family Resource Center ("Lake FRC"). Lake FRC is one of Lake County's largest community-based organizations. It provides a continuum of strength-based family support services that address many of the contributors to poverty in Lake County. Within the Lake FRC umbrella, specific programs address early childhood education, health (mental and behavioral), and safety, e.g., domestic violence response. As noted, Lake FRC operates Lake County's only Early Head Start. It operates the County's only domestic violence shelter and its rape crisis center, plus the community crisis line. It operates the Adolescent Family Life Program and Cal-Learn, serving pregnant and parenting teens, with a focus on healthy family life, educational success (i.e., high school graduation), and economic autonomy. Lake FRC is an enrollment agency for the Healthy Families Program. It is the implementing agency for the Tobacco Control Program in Lake County, under contract with the County Department of Health Services, providing: (i) tobacco cessation workshops and support groups for adults and teens; (ii) the "My Strength" youth group; and (iii) regular Sales to Minors Compliance Checks. Lake FRC provides both mandated and voluntary Nurturing Parenting classes, with curricula addressing the challenges of parenting children at various ages and/or different stages, e.g., entering kindergarten. Lake FRC also provides Differential Response services to families with young children. Differential Response is a voluntary program for families who are at risk of future involvement with Child Welfare Services, including out-of-home placement. These services help stabilize families and reduce stresses affecting children. Lake FRC provides anger management, child abuse intervention, behavioral counseling, and other services Countywide. Lake FRC's goal, like that of the LCCAA, is to help families become self sufficient and to build strong families and communities.

At this time, Lake FRC is threatened with the loss of \$1 million in state funds, affecting 8 of its safety net programs. The targeted programs include the domestic violence shelter, teen parenting services, Healthy Families insurance enrollment, CalWORKs, and its domestic violence, substance abuse, and anger management programs. If Healthy Families is cut, more than 1,700 children of low-income, working families will lose access to health care. The local economy will lose over \$2 million/year.

The **LCCAA's relationship with LFRC** is largely limited to referrals and ad hoc support. We refer clients who need one or more services, such as domestic violence shelter and deliver fresh produce, when available. We do have many clients in common, so a good working relationship is an asset.

c. 1<sup>st</sup> 5 Lake County. 1<sup>st</sup> 5 Lake County is the Proposition 10 Commission, formerly known as the Children and Families Commission (the "Commission"). The 9-member Commission develops and updates a strategic plan to improve child development throughout the County, by creating positive formative experiences for children aged 0-5. The 1<sup>st</sup> Five Lake County Strategic Plan focuses on four general areas:

- ✓ Child care and early childhood education
- ✓ Teacher and parent education and support
- ✓ Health and wellness
- ✓ Improved systems integration

1<sup>st</sup> Five Lake County collaborates with other agencies and groups to create and implement its strategic plan, through a system of large grants, special projects, and mini-grants.

The **LCCAA's relationship with 1<sup>st</sup> 5 Lake County** focuses on planning and implementing programs that benefit children and their parents. The Executive Director of 1<sup>st</sup> 5 Lake sits on the LCCAA's Board of Directors.

## **2. Employment Development and Support.**

Welfare reform created a new way of doing things in Lake County, shifting focus from maintaining residents at a basic survival level (which enabled the culture of poverty) to facilitating the transition to self-sufficiency. Unfortunately, inadequate local wages and available jobs mean that even full-time work may not lift individuals and families out of poverty, a problem exacerbated by the effects of the current recession.

a. DSS. As noted, DSS provides employment development, job clubs, counseling, referrals, On-The-Job Training (in which employers hire clients with a share of their wages paid through DSS), subsidized child care, and supports to help clients navigate the challenges of developing a career path and then finding and keeping a job on that path. DSS also supports services that remove barriers to employment, such as domestic violence intervention (Lake Family Resource Center), mental health services

(Lake County Mental Health Services), and Differential Response, which provides early, voluntary intervention and supports to ameliorate child abuse and neglect and avoid breaking up families. As noted, DSS has contracted with The Arbor to provide job development, employability training, etc. to its clients and to their young adult children, through JobZone (adults) and MiZone (youth).

b. Employment Development Department. (EDD). EDD manages unemployment payments, assists recipients to find jobs, provides labor market information and studies, and is a key partner in the Workforce Investment Act (WIA) program.

c. WIA. WIA operates a One-Stop Career Center located in Lakeport. Its core partners include: DSS, EDD, the Lake County Office of Education, the California Department of Vocational Rehabilitation, and others. Like The Arbor, it provides job development services, including assessment, employment counseling, job search, career pathway and education planning, and referrals to other needed services. WIA provides business development services to assist business to adapt to changing markets, recruit qualified employees, etc.

The **LCCAA's relationship with DSS** is discussed above. We refer clients directly to WIA and EDD; WIA may refer clients internally to EDD. Both WIA and EDD refer clients to us for assistance, e.g., for job openings with LCCAA, for services to supplement limited incomes, barrier removal supports, shelter, etc.

Note: Subsidized child care, including after school care, is a key employment support. Employees with stable, affordable, quality child care are more productive and have fewer absences. Child care is discussed under a separate heading.

**3. Housing – Permanent, Transitional, and Emergency.** Accessible, affordable, decent housing resources for the low-income community are limited, as follows:

(i) DSS is the Housing Authority, administering the Section 8 rental voucher program, which is limited to 224 slots. DSS has agreed to provide Section 8 vouchers for Transitional Shelter clients, as availability allows.

(ii) LCMH provides permanent housing for a small group of adults with mental health issues and operates a small apartment block for adults planning to transition to community placements. This latter resource depends on Mental Health Services Act funding, which may be in jeopardy.

(iii) The County and the two Cities have collaborated to create low-income rental housing at various locations. These developments rent-up very quickly. The required strict credit and criminal background check clearances have restricted access to these resources.

(iv) As noted, Lake FRC operates the County's only domestic violence shelter. The shelter has had to cut most of its staff, but will stay open.

(v) As noted, other than the LCCAA, there is no transitional housing for adults, families, and young children in the County.

(vi) There are no emergency shelters in the County. The schools and the National Guard Armory are available for disaster relief.

(vii) The newly-opened Safe House is a collaborative project led by the LCCAA, but with extensive community support from the Friends of the Safe House, the Random Acts of Kindness volunteer group, Rob Roy Golf Course, and concerned community members.

The LCCAA is a leader in the planning and development of housing solutions. Our **relationships** rely on reciprocal referrals to the entities listed above. Our staff assist clients in our partners' housing to prepare for re-entry, including planning for budgets, tax preparation, employment, etc.

#### 4. Education.

Lake County's educational resources are limited. Lake County has 8 school districts, including the Lake County Office of Education. Collectively, they operate 35 schools, offering a wide range of programs from traditional to alternative. The Lake County Office of Education ("LCOE") operates the two community schools, the Juvenile Hall School and the ASPIRE program for pregnant and parenting teens who want to earn a high school diploma. LCOE's schools serve students from throughout the County. There is only one charter school, operating in the Middletown Unified School District. Rural areas such as Lake County typically have many small districts.

LCOE is the central educational provider, serving residents of all ages, from preschool through adulthood. We have two community colleges. Mendocino College - Lake serves the north and Yuba College - Clearlake serves the south area of the County. The range of in-County educational resources and supports, although limited, provides opportunities for adults to complete high school and go on to achieve certification in various fields and/or earn their AA degrees. With the growth of the internet, more residents are able to earn college credits on-line, including four-year degrees.

LCOE develops resources and programs that help schools throughout the County provide the highest quality education for all children. Such resources and programs include:

- ✓ Direct educational services from preschool through high school
- ✓ Extended learning opportunities for students through after school programs
- ✓ Eliminating barriers to students' healthy development and learning (health, oral health, emotional/mental/behavioral wellness, truancy, etc.), through Healthy Start and Safe Schools/Healthy Students

- ✓ Homeless student assistance, funded by the McKinney-Vento Homeless Student Assistance Act and administered by Healthy Start
- ✓ Infusing balance into the educational system with career/vocational opportunities for all students, including school-to-career, Transition Partnership Program (work readiness & job placement), adult education, GED preparation and testing, etc.
- ✓ Work readiness
- ✓ Grant seeking and grant writing for programs that provide direct services to schools and districts
- ✓ Professional development for school staff
- ✓ Direct assistance to schools/districts to increase student achievement
- ✓ Development of a "college-going" culture in coordination with local high schools
- ✓ The renovated Taylor Observatory and Planetarium, which is available to all schools and the public.

Through LCOE, schools and districts have access to a wide range of services without having to set up dozens of separate administrative structures and programs, e.g., separate Healthy Start programs for each school, with separate project directors and grants administration costs. In a small County with many small districts, this is an efficient use of resources. Further, a central source of continuity is valuable as so many students ping-pong in and out of districts.

## 5. Child Care.

This discussion is limited to public center-based providers. There about 8 privately owned centers in the County, all vulnerable to economic downturn and the loss of subsidized child care. Although Lake County is fortunate to have a network of licensed Family Child Care Homes, as well as some dedicated Family, Friends, and Neighbors providers, such providers tend to be active for much shorter terms than the Centers. The state and County 1<sup>st</sup> 5 Commissions (Prop 10) have provided significant incentives for child care providers to continue their educations. The result has been a more highly qualified child care workforce with the capacity to provide quality child care.

(a) Early Head Start. Early Head Start serves low-income children aged 0-3, with spaces reserved for children with special needs regardless of income. Lake County's only Early Head Start program is administered by Lake Family Resource Center. Currently, Lake FRC operates one EHS center in Lakeport, but is considering expanding to Lower Lake.

(b) Head Start. Head Start serves low-income children aged 3-5. Lake County's Head Start centers are operated by North Coast Opportunities. There are two centers in Clearlake, one in Upper Lake, and one in Lakeport.

Both EHS and Head Start provide structured, enriched programs with parent involvement requirements, nutritious meals, and detailed, normed assessments.

Children who attend these programs are proven to do better in school, not only cognitively, but also socially. Because these programs are reserved for low-income families, the children of the poor receive better quality care than children of the working poor or lower middle class who cannot qualify for subsidized care.

The CAA has a **close working relationship** with Head Start, and Early Head Start referring children of its clients for assessment and enrollment.

(c) Lake County Office of Education – Child Development Division. LCOE operates the County's state preschools (Early Connection) and provides after school programs for children in grades K-5 (Kid Connection). The Early Connection has the capacity to serve 336 preschoolers, while the Kid Connection can serve over 400. The state preschools provide a highly structured program, with normed assessments. The Kid Connection's comprehensive program focuses on: homework support; parent involvement; community service; and recreation. Both programs serve low-income children and families. Both are funded by the California Department of Education and are threatened by the on-going budget crisis.

(d) Lake County Child Care Planning Council. The CCPC is jointly appointed by the Lake County Board of Supervisors and the County Superintendent of Schools. It prepares the County's 5-Year Child Care Needs Assessment, 5-Year Child Care Plan, Economic Impact Reports, and identifies child care priorities for funding. The CCPC sponsors trainings, administers the Respite Child Care Fund (for families at risk due to stress, e.g., illness), and provides a planning and networking forum for all child care providers.

As discussed, the **LCCAA's relationship with child care providers and planners** focuses on connecting low-income clients to subsidized child care to promote family self-sufficiency, by removing barriers to employment and supporting healthy child development. The LCCAA also offers comprehensive, after school care for older students at its Youth Center in Clearlake and accepts referrals from other child care providers, schools, and self-referrals from families and even the youth themselves.

#### **6a. Health and Wellbeing.**

The World Health Organization identified the feedback loop in which poverty leads to ill-health and ill-health contributes to poverty. Too many Lake County residents lack access to affordable health care, from basic prevention to specialty care, including, but not limited to, high risk pregnancies, pediatric care, sedated dentistry. About one-third of all deliveries still occur out-of-County. Resources addressing the health care needs of the low-income community include:

a. LCOE- Healthy Start. Healthy Start provides school-based health care access to children aged 0-18, with services available in all Lake County school districts. Services include: parent support and advocacy; referrals for medical care and dental care; the mobile dental clinic; school supplies; transportation; Friendship Groups; referrals to on-

site school counseling; lice eradication; health and nutrition education; home visits; assistance in obtaining kindergarten immunizations and physical exams; school attendance counseling; food and clothing, hygiene, and survival supplies; and parent support and advocacy. Healthy Start is a service hub, linking students and families to providers, organizing referrals, paperwork, permissions, transportation, and follow-up. Healthy Start pioneered Nurturing Parenting, a research-based curriculum that provides ages-and-stages specific curricula to help parents understand and support their children's development. Lake Family Resource Center and Child Welfare Services are the core providers. Healthy Start is overseen by its Countywide interagency collaborative. With the loss of the CDDPP program, discussed below, Healthy Start is losing a key partner for the provision of children's oral health services.

b. Sutter Lakeside Hospital and Adventist St. Helena – Clearlake and affiliated clinics. These two private hospitals are the County's only hospitals. Adventist St. Helena - Clearlake serves the County's highest concentration of low-income individuals. It opened the Family Health Center, a large, multi-disciplinary clinic in downtown Clearlake, across the street from Lake County Mental Health Services' southshore clinic. The Family Health Center is within a half-block of the LCCAA headquarters. Services include: general health, pain management, obstetrics/gynecology, dentistry. The hospitals each provide emergency room care. Sutter Lakeside Hospital serves the northshore. Its affiliated Sutter Wellness Center offers a holistic approach to personal wellness. Sutter Wellness Foundation has developed a mobile medical clinic which will coordinate visits with the LCCAA's twice/monthly food distributions. Each hospital has a group of small, affiliated clinics dotted around Clear Lake. Due to the current loss of insurance, we expect to see emergency room services rise.

c. Lake County Department of Health Services ("DHS"). DHS has offices in Lakeport and Clearlake, to expand residents' access to public health care. Its programs include

- ✓ *Targeted case management ("TCM"):* Public Health Nurses visit the homes of new mothers and others to connect them with health care services
- ✓ *Maternal, Child, and Adolescent Health ("MCH"):* MCH Director and MCH Coordinator serve as liaisons with State and Federal MCH programs and with the community on policy issues
- ✓ *California Children's Services ("CCS")* (serving children with certain disabilities)
- ✓ *Child Health and Disability Program ("CHDP")*
- ✓ *Well Child Clinics*
- ✓ *Immunization Clinics*
- ✓ *California Lead Poisoning Prevention Program ("CLPP")* (contracted with Easter Seals to do direct services)
- ✓ *Disaster Preparedness*
- ✓ *Communicable Disease Surveillance and Control*
- ✓ *AIDS Education and Prevention*

d. Mendocino Community Health Clinics – Lakeside Health Center. The Lakeside Clinic is the northshore counterpart to the Family Health Center in Clearlake. It accepts

Medi-Cal, Medicare, CMSP, and sliding scale, as well as private pay. It offers comprehensive medical care, dental care, substance abuse treatment, and other services. It has invested in bilingual staff and a multi-cultural approach. The Clinic works closely with Healthy Start to set aside blocks of time for students. Mendocino Community Health sits on the Health Leadership Network and is a key leader in health care planning and delivery in Lake County.

e. Lake County Tribal Health Consortium, Inc. ("LCTHC"). LCTHC is the Indian Health Services provider for Lake County, serving all Native Americans residing in Lake County, regardless of tribal affiliation. LCTHC has grown into one of the County's largest health care facilities at over 13,000 square feet, serving over 1,860 active Native American clients/year. It offers comprehensive primary medical, dental, and counseling services for children and adults, including prevention, well-child care, family planning, prenatal care, health education, and referrals. Its community health outreach services include nurse home visits, health education, diabetes outreach and prevention, etc. Its Human Services division provides alcohol and other drug counseling, mental health counseling, and social services. Finally, the BVC offers preschool/parenting and other services.

f. Lake County Children's Dental Disease Prevention Program ("CDDPP") & Other Resources.

The County has one Dental Health Professional Shortage Area. There are 26 practicing dentists, for a ratio of 2 dentists per 5,000 population. About 27% are nearing retirement (30 years since licensure) and only 15% are "newly licensed" (within 5 years), suggesting we are going to have fewer dentists in the near future. Further, some are only part-time. About 3 dentists accept Medi-Cal, as do the two community clinics which provide dental services. These clinics employ 5.4 FTE dentists (UCLA Healthy Policy Fact Sheet, May 2009). Healthy Start works closely with both. Each dedicates days to Healthy Start children; Healthy Start makes sure the children are there, on time and with all required paperwork. This arrangement is positive and productive. Sedated Pediatric Dentistry is available out-of-County at a new clinic collaboratively planned with Lake County as a partner.

The CDDPP was funded as a dental education and prevention program to serve preschoolers through 6<sup>th</sup> grade. It provided:

- ✓ Screenings
- ✓ Oral health education
- ✓ Fluoride supplementation
- ✓ Free sealants to 100+ children

CDDPP also provided screenings, sealants, and dental treatment to about 200 children and their families through the Mobile Dental Clinic Program. In collaboration with Healthy Start, DDPP served children with special needs and other students, as feasible,



including older students at various sites, plus preschools not covered by the CDDPP grant.

CDDPP also served as a liaison between the private and safety-net dental providers, e.g., by participating in Dental Health Month, educating providers on the Kindergarten Oral Health Assessment requirement, etc. DDPP works closely with Lake FRC, serving on the Early Head Start, Lake/Mendo Early Head Start, and Head Start Advisory Committees. DDPP participates on the MCAH Advisory Board. Our DDPP program manager also sits on the Board of the Pediatric Dentistry Initiative, which has begun offering sedated dentistry at its new facility in Windsor.

This program has been eliminated from the California budget, jeopardizing the health of Lake County's children and youth. However, to date, it has received a short contract extension and may receive additional 3-6 month extensions. There are no guarantees, however. The consequences of the loss of this one program to Lake County exemplify the central weakness of our service system: we have no back-ups, no redundancy, and still rely on single-source providers who become essential to the entire continuum.

g. Lake County Mental Health Services ("LCMH") and Alcohol and Other Drug Services ("AODS"). Lake County has consolidated these two departments, making AODS a division of LCMH. LCMH is the only local public or private provider mandated to serve the poverty population. It is the only mandated provider of Medi-Cal services and services to those with serious mental illness. Most other providers, including school-based services, focus on low-to-moderate acuity, e.g., mild anxiety. It operates two clinics, one on each side of the Lake. It built and operates a small cluster of pretty supportive housing units, within walking distance of DHS and LCTHC in Lakeport. In addition to its core services, LCMH has created a network of services and supports funded by the Mental Health Services Act, including: (i) separate, user-friendly, drop-in centers for adults and TAY; (ii) a small complex of apartments in Clearlake, by the adult drop-in center; (iii) a forensic clinician, specializing in transition/re-entry planning for inmates of the jail and juvenile hall; (iv) contract psychiatric services; and (v) outreach and engagement specialists dedicated to the underserved Latino and Native American communities. LCMH only meets about 26% of the need for mental health services.

LCMH collaborates with: (i) the local chapter of the National Alliance for the Mentally Ill, bringing together consumers and family members of those with mental illness to plan and monitor LCMH and other provider services; (ii) the local Mental Health Board; and (iii) the Cultural Competency Committee, which provides access to national best practices, research, and the County's diverse communities. The Cultural Competency Committee coordinates workshops and trainings on alternative healing practices, culturally competent service delivery, and other issues. When affordable, these trainings are open to other providers, sometimes at no charge. When feasible, more general sessions are held in the evenings for interested community members.

AODS provides prevention, intervention, and ongoing support to adults and youth struggling with addictions. Its integration with LCMH allows both to better serve the many residents with dual diagnoses. AODS operates clinics in Lakeport and Clearlake

to maximize outreach. AODS funds substance abuse treatment and supports at New Beginnings. However, the funding is projected to be cut, so the LCCAA is looking for new ways to continue these services.

h. LCOE-Safe Schools/Healthy Students. Safe Schools/Healthy provides school-based clinical and counseling services to preschool-12<sup>th</sup> grade students at low-to-moderate acuity. Services are provided via: (i) one-on-one counseling; (ii) issue-focused small groups; and (iii) classroom curricula, including *LifeSkills*, *Second Step*, and *Reconnecting Youth*. Students are referred by school staff, Healthy Start, parents, friends, community organizations, and may also self-refer.

i. Health Leadership Network (HLN). The HLN coordinates a network of public and private entities who work together to improve health in Lake County. It is designed with the flexibility to identify and then address health issues, as prioritized by the community. It does not provide services directly, but is a unique collaborative vehicle for addressing how services are delivered so that consumers receive optimal benefit. Currently, HLN is addressing the intertwined variables of: food security, healthy food availability, nutrition education, Farm-to-School initiatives, and obesity prevention. Its core members are:

HLN members include:

- ✓ Sutter Lakeside Hospital
- ✓ Adventist Health St. Helena – Clearlake Campus
- ✓ Lakeside Health Center (Mendocino Community Health Clinics)
- ✓ Lake County Department of Health Services
- ✓ Lake County Department of Social Services
- ✓ Lake County Office of Education (Healthy Start)
- ✓ 1<sup>st</sup> Five Lake County
- ✓ Lake County Tribal Health Consortium, Inc.
- ✓ Easter Seals of Northern California
- ✓ Lake Family Resource Center
- ✓ Redwood Children's Services, Inc.

As discussed, the **LCCAA's relationship to health care providers** relies on reciprocal referrals. LCCAA staff make and case-manage referrals to increase low income individual's access to health care, increasing their overall well-being, productivity, and capacity to enjoy life and become self-sufficient.

**6b. Nutrition and Food Security.** Resources available in this high priority area include food distribution and nutrition education. Our primary source of emergency food is the Redwood Empire Food Bank, located in Santa Rosa, which is an affiliate of Feeding America. The Food Bank provides a central warehouse and also administers our Commodity Supplemental Food Program. The Farms-to-Families program, produce growers, the Lakeport Gleaners and the Hunger Task Force supplement our Partnership Distribution Organizations and local growers' donations with fresh vegetables and fresh fruit, when available. These groups and individuals collectively

contribute several thousand pounds of in-season fruits and vegetables to the CAA for distribution to low-income clients. As discussed above, WIC provides food and nutrition education to pregnant and postpartum women and their children aged 0-5. In Lake County, the HLN, Healthy Start, the schools, the Hunger Task Force, local farmers, and community members are working together to make healthier foods available at school, to teach children and families how to grow their own produce, and to support local farmers.

Distribution points are provided by voluntary partners, including the senior centers, the Lakeport Seventh Day Adventist Church, and the Finley Grange. Volunteers assist in the distribution.

As noted, the **LCCAA has established partnerships** with a variety of organizations providing food and nutrition education and planning to increase resources and improve outcomes. The LCCAA is: (i) a Subsidiary Distribution Organization of the Redwood Empire Food Bank; and (ii) a collaborative partner with 24 partner distribution organizations, including the senior centers and churches around the lake. The Lakeport Gleaners and Hunger Task Force supplement our Commodities Supplemental Food Distribution and Farm-to-Families distributions with fresh vegetables and, when available, fresh fruit. The **CAA and WIC make reciprocal referrals** of eligible clients to create a system of care for new mothers and young children.

Nutrition education is currently provided by: (i) Chic Le Chef, a small cooking and catering business, which surveyed students at the Youth Center, found out what students will eat, and created a cookbook for their families; (ii) Healthy Start, on-site at the schools; and (iii) WIC. WIC is the primary source of reliable food and nutrition education for pregnant and postpartum mothers and young children up to age 5. WIC provides access to relatively healthy foods: juice, milk, even fresh produce from the local farmers' markets. Because WIC links food distribution to health care and nutrition education, participation in WIC helps educate mothers on how to choose and prepare healthy, nutrition-rich foods.

## **8. Quality of Life.**

Low-income communities and neighborhoods typically lack the amenities that more prosperous areas take for granted/ Lake County and its residents continue to struggle with quality-of-life and insufficient assets. Although each town is different, they have some common challenges, including: (a) no public community centers; (b) no public recreation programs; (c) no shuttle buses within each town and limited public transit between towns; (d) only two public pools for the entire County; (e) no YWCAs, YMCA's, or comparable facilities. The only water park, a key source of entry-level jobs and summer-time recreation was closed years ago. Despite efforts to move it or create another, it remains shutdown and the equipment may be too dilapidated to repair.

There is a continuing discrepancy between the amount of child care needed and that available. Comprehensive, community-based after school programs for older youth are very important, as the critical after school period is the time when unsupervised youth experiment with drugs, alcohol, sex, crime, violence, gangs, and other risky behaviors.

The County has some remarkable quality-of-life assets, however. Its unspoiled natural beauty, extensive forests and mountains, cleanest air in the state, and Clear Lake are highlights. These include: (a) a ring of beautiful County parks right on the lake, free and accessible to all; (b) Redbud and Austin Park in Clearlake, also free; (c) Westside Community Park in Lakeport, a public-private partnership that offers soccer and baseball fields, walking and hiking trails, and other amenities; (d) Rodman Slough and other areas preserved by the Land Trust; (e) Anderson Marsh State Park and Audubon Sanctuary. Mt. Konocti is in the process of being preserved and protected for future generations. Most of the parks are free or charge a minimal fee.

The County's cultural resources include: (a) its Arts Council; (b) museums; (c) the Children's Museum of Art and Science (operating programs at Anderson Marsh State Park); (d) the Art & Nature Walk in Middletown; (e) the Lower Lake Schoolhouse Museum and Theater; (f) the Soper-Reese Theater (being renovated as a top-quality regional venue); (g) arts and crafts guilds; and (h) the Taylor Observatory and Planetarium, among others. The County Library has branches in Clearlake, Lakeport, Middletown, and Upper Lake. The network of Senior Centers provides recreation, socialization, and access to services to seniors throughout the County. The Skateboard Park in Clearlake has been repaired and re-opened. The two public pools continue to operate; one has been substantially renovated and made handicap-accessible.

There are small recreation and activities programs for youth. Both Boy Scouts and Girl Scouts have troops here. Various private sports leagues operate, e.g., Konocti Basketball League, Kelseyville Soccer, and so forth. We have 4-H and Future Farmers. LCOE operates a comprehensive after school program for students aged 5-11; Lakeport has a comparable program. The LCCAA's Youth Services Program has filled the void created when the national organizations of the Boys and Girls Club and Big Brothers/Big Sisters forced closure of our local chapters. Hiking in the parks, forests, and woods, kayaking on the lakes, and fishing are free or low-cost recreational activities. Fishing is a major source of recreation, although it can be costly. The Senior Centers provide recreation, social activities and trips, and connections to resources. They also open their facilities to public meetings, conferences, benefits, etc., when feasible.

The ongoing barrier is lack of transportation for low-income residents to use and enjoy the community assets available to them. In most towns and even the cities, it is impossible to walk to recreation. Very few streets have sidewalks. Many revert to unpaved, unlit roads just blocks from the center of town, including both the Cities of Clearlake and Lakeport. Extreme weather also makes it difficult for residents to get to and enjoy community life.

### **C. CAA PLAN FOR REVIEWING AND REVISING COMMUNITY INFORMATION PROFILE.**

The CAA will review and update the Community Information Profile in full at least once per year, using both quantitative and qualitative sources. Objective data is provided by the US Census, California Department of Finance, Area Agency on Aging, California Department of Aging, RealtyTrac, ZipSkinny, California Department of Health Services, et al. Local surveys, reports from providers, and direct testimony of the low-income community add perspective and candid insights. In addition, we participate in our partner's various assessments, which include:

1. The Lake County Children's Report Card Update, sponsored by DSS at multi-year intervals, which evaluates the economic, health, education, safety, and family strength domains affecting children's wellbeing. Its comprehensive design covers a wide range of indicators evaluating the status of children and families Countywide.
2. The annual 1st 5 Lake Strategic Plan Updates
3. The Child Care Planning Council 5-Year Child Care Needs Assessment
4. The City of Clearlake Vision Task Force
5. The Mt. Konocti Vision Task Force
6. The 5-Year Lake-Mendocino Area Agency on Aging Needs Assessment for older adults
7. El Red de Bien Estar de Familiar Latina, a newly-formed group focused on providing health care resources for Latino children and families.
8. The upcoming Homeless Coalition Survey

In addition, the LCCAA creates local surveys that track the CSD 801's, one for providers and one for clients. These surveys are administered bi-annually and the results fed back into the Profile, Needs Assessment, and CAP. These assessments update and complement our Profile and help ensure that the LCCAA operates on the basis of current information regarding the communities we serve and the status of our partners. The mid-year reports to the CSD on the 801's provide interim data on both client demands and services provided. We track and rely on changes in the demand for services to tell us what is missing in our service system and what our clients' real-life priorities are. The interim service numbers also help ensure that we stay on track to meet our NPI projections.

---

## **2. Needs Assessment.**

**Introduction.** This Needs Assessment draws on information developed in the Profile, but only summarizes relevant findings and key points to support its analysis and recommendations.

### **A. Poverty.**

*A (i) Analysis.* Poverty is our global challenge. The Community Information Profile described the status of our low-income community and identified the many contributors that entrench poverty in Lake County. This Needs Assessment will briefly analyze the Profile's demographic and economic conditions and other poverty-related factors. The Profile described a complex of interconnected variables that feed back on each other. For example, low educational attainment reduces a person's lifetime earnings; collectively, such lower earnings reduce the tax base; the lower tax base limits resources available for schools, reducing their capacity to provide high quality education that leads to higher rates of high school graduation. People in poverty typically eat the "poverty diet", which is linked to obesity, cardiovascular disease, diabetes, and other conditions. These health conditions burden the individual and cost the community resources which could be invested in preventive health care, public recreation, nutrition education, and other pro-active services. Lake County is trapped in multiple feedback loops which have led to an intergenerational culture of poverty.

*A (ii) Need.* However, the complexity of the problem creates many opportunities for intervention, e.g., employment supports, education supports, income maximization, housing, health care, child care. Because the variables are so closely interwoven, each intervention is likely to have multiple benefits. Further, each intervention is likely to affect more than one variable, as noted above. Prioritizing interventions accordingly is a cost-effective approach to using the LCCAA's limited resources. The following discussion breaks down the contributors to poverty in Lake County.

### **B. Demographics.**

*B (i) Analysis.* Lake County's demographics describe a County in the process of a stressful transition from a rural, racially-homogenous area with an economy based on agriculture, mining, logging, and manufacturing to a sophisticated wine-growing region with an economy that relies on tourism, services, and retail sales. Racially, the County is increasingly diverse, with the Latino population becoming the largest minority group and a significant socio-economic force. This rapid demographic change is both enriching and stressful. Communities, neighborhoods, schools, and agencies have to adapt, expand, and learn to work together in a more diverse community.

*B (ii) Need.* Agencies need to recruit, hire, train, and retain personnel who are multi-cultural and bilingual. They also need to train all personnel in culturally competent service delivery. Materials must be available in Spanish and English, at a minimum.

Interpreters and translators must be available. These services are essential, but require agencies to change their internal cultures and budget for these costs.

### **C. Employment and Underemployment.**

*C (i) Analysis.* Lake County's unemployment rates are consistently higher than the state and national rates. The labor market is increasingly skewed toward low-paying, seasonal jobs without benefits. These jobs do not pay self-sufficient wages, so full-time work may not lift individuals and families out of poverty. Further, unemployed and underemployed individuals cannot be lumped together into a single service population. Some are young and new to the workforce, seeking entry jobs and a career path. Others have been forced into unemployment, despite higher education and professional experience. Others are entering the workforce due to divorce, death, domestic violence, or loss of a partners' income. Older individuals have had their retirement funds decimated due to the market crash and are seeking work. Some low-income workers are looking for help to improve their job skills and employability, so they can achieve self-sufficiency.

*C (ii) Need:* This multi-faceted problem requires a wide range of systemic and individualized interventions and supports. The WIA, EDD, DSS, and Job Zone partners, described in the Profile, provide extensive, in-depth services to the groups described above. Such employment services include: assessments, employment counseling, job clubs, job training, job searches, specific skills upgrades, résumé and application preparation, referrals to employers and education programs, work-experience opportunities, and case management.

However, many low-income clients need help gaining the basic skills, confidence, clothes, and transportation before they can or will use and benefit from these services. The LCCAA is typically the first source of such help. Some clients also need practical, structured, and supervised work experience, to increase their employability. These are transitional placements that help clients gain specific job skills, the "soft skills" valued by employers (punctuality, good hygiene, positive attitude, and commitment to productivity), stronger résumés, and local references. On-the-Job Training programs and Work Experience (for youth) provide such opportunities.

Finally, low-income individuals also need support services that remove barriers to employment. As discussed in the Profile, the top barrier removal needs in this area are:

- (a) Subsidized child care, for children of all ages, including preschool and comprehensive after school programs
- (b) Housing assistance to improve living space, so families are stable and workers can go to work, rested, clean, nourished, and healthy
- (c) Business clothing
- (d) Utilities assistance to keep families stable and workers clean and job-ready
- (e) Access to health care services for the wage earner or family member, to support employment stability by improving workplace attendance and productivity

- (f) Bus and gasoline vouchers
- (g) DMV manuals and transportation to the local DMV to assist individuals to obtain/renew their drivers' licenses.

The LCCAA provides these services, as follows: (i) trained staff provide one-on-one guidance and counseling to help clients identify and enroll in appropriate programs; (ii) business clothing is provided through the on-site Clothes Closet; (iii) information on partners' programs, job listings, and other information is posted in the office; (iv) a computer is available to all clients and volunteers for on-line job searches; (v) counselors and staff refer clients to workshops and classes on relevant topics and to barrier removal services, e.g., subsidized child care, LIHEAP, etc.; and (vi) trained staff provide case management to help clients stay on track and progress from job seeking to finding a gainful and meaningful job. The LCCAA also provides work experience at its office, youth center(s), food distribution, and other activities. We hire our clients and accept referrals from DSS, WIA, and others for On-The-Job-Training and Work Experience.

#### **D. Self-Sufficiency.**

*D (i) Analysis.* As discussed at length in the Profile, self-sufficiency eludes many Lake County residents, from low-income to middle class. Causes and contributors to this challenge include low wages and high costs of living. The struggle to maintain a basic lifestyle consumes the time and energy that low-income individuals need for the education, career tech training, and job readiness required to achieve self-sufficiency. Interim assistance to extend their limited incomes creates opportunity for low-income individuals to pursue the options that will lead to self-sufficiency.

*D (ii) Needs:* With costs rising and wages stagnant at best, the low-income community needs a wide range of economic and other supports to supplement their wages. These include:

- (a) Subsidized child care for children of all ages, including older youth, provided by or through DSS, Early Head Start, Head Start, the state preschools, and after school programs;
- (b) Assistance paying for utilities (electricity, water, propane, wood), such as provided by the Home Energy Assistance Program, CARE discounts, PG & E Reach, and the Emergency Shelter & Food Program (for water assistance)
- (c) Housing vouchers, including Section 8 assisted housing;
- (d) Food assistance, through food stamps, food pantries and food banks, WIC, Farm- to-Schools,
- (e) Transportation vouchers and assistance.

Each intervention has multiple benefits supporting self-sufficiency. For example, utilities assistance helps clients stay healthy and clean and, therefore, obtain and retain jobs. Clean children fit in at school and are more likely to attend regularly and succeed. As noted, educational attainment is fundamental to future earnings.



**E. Homelessness.** Lake County homelessness is typical of rural areas. It is concentrated in women, children, families, and veterans. Unlike urban areas, it is somewhat invisible. Foreclosures and job losses have created the “new homeless”, many of whom have never needed public assistance.

*E (i) Analysis.* Homelessness destabilizes individuals and families. It contributes to low educational attainment, malnourishment, ill-health, and even family violence. It damages community quality of life. Homeless individuals have difficulty in securing and maintaining employment. They cannot contact employers or receive messages; they have nowhere to shower and dress.

*E (ii) Needs.* This is an area of growing need. Lake County has no emergency homelessness shelters and only one Transitional Shelter (operated by the LCCAA). Given current funding constraints, it is highly unlikely that any agency or government will be building such shelters in the near future. Therefore, we identified the following needs:

- (a) Continued stable funding for the LCCAA's existing Transitional Shelter and voucher program
- (b) Continued stable funding for the school-based McKinney-Vento Homeless Student Assistance Program
- (c) A “Homeless Fair” (working title only).

Agencies and civic groups that provide services needed by the homeless would set up tables, with computer and internet. They would qualify individuals for service on-the-spot and, if feasible, arrange for same-day appointments. Agencies serving specific age groups would be grouped together. We have found that Transition Aged Youth (~16-24) are uncomfortable with service providers who primarily work with adults. Many are alienated from family and poorer than the general population.

## **F. Education.**

*F (i) Analysis.* Despite progress since 2000, very few Lake County residents have completed any post-secondary programs. A variety of factors contribute to this problem. These include: (i) cost; (ii) lack of time due to the need to work; (iii) lack of confidence; (iv) lack of relevance; and (v) the culture of poverty, which punishes individuals who try to rise above the family's historical level of achievement (Payne, R., A Framework for Understanding Poverty, 4<sup>th</sup> ed., aha Press). Pure academics are not part of the County's rural culture, but practical advanced education is valued. Post-secondary education is directly correlated with lifetime earnings and, therefore, with the economic strength of families and the community overall.

The foundation of school success starts early, with good nutrition for brain and body development; enriched, quality preschool and child care (including after school); and safe, secure, nurturing families. Preschool and after school are discussed under **Child Care**, below. LCOE and the 7 other school districts and the two Community Colleges

help residents complete high school and two-year college programs. In addition, LCOE's Regional Occupational Program and the Career Technical Education options offered at the District and college levels allow students to earn certificates attesting to specific skills, such as ARC welding, bookkeeping, safe food handling, etc. These certificates increase individuals' earning power while they continue on their educational and career paths.

*F (ii). Needs.* Education-related needs range from individual supports to institutional changes. The County has no 4-year college and no realistic near-term prospects of establishing one. The planning process to establish a private 4-year college has been terminated and the site returned to the donor. Therefore, we must fully utilize what we have: LCOE, the 7 other school districts, and the two community colleges. During the 2008-2009 school year, these entities and the County began meeting to plan ways to consolidate operations and to integrate programs to avoid duplication. For example, one district offers Career Tech education in agriculture. Despite being located in a growing vineyard area, another consciously chose to expand its Career Tech program with an autoshop rather than an agricultural program. The prioritized education needs include:

- (a) Counseling and guidance to access financial aid and to plan a post-secondary program that is suited to the student's aptitudes, interests, and the local labor market.
- (b) Expanded resources and offerings, including integration of high school-level career tech courses with college courses, including concurrent enrollment. This approach ensures that high school students graduate with certifications, college credits, and work experience already in place. Many graduate with jobs, so they can support themselves while they continue their education.
- (c) Subsidized child care, as discussed above.
- (d) Counseling and guidance to support re-entry students who want to earn their high school diplomas through adult schools, complete the GED, and/or continue their educations.

In addition to direct financial assistance and support for educational attainment, low-income clients need support to develop the financial skills to better utilize their limited resources. Examples of such skills include:

- (a) Understanding how the tax system works, so that more families will file tax returns and claim tax credits
- (b) Basic financial planning, e.g., techniques for to create the habit of saving, to create "rainy day" funds, first-and-last month rent and security deposits, etc. For example, funds from tax credits could be automatically deposited into savings.
- (c) Basic budgeting skills that match income to expenses, so low-income clients can avoid using exploitative pay-day loan companies and other organizations that take advantage of them.

## **G. Health.**

*G (i). Analysis.* Good health promotes prosperity; ill-health perpetuates poverty. Lake County is a medically underserved area. Dental care and mental health services for low-acuity adults are even less available than general health care. Healthy Start has made significant progress in serving low-income children, but adult low-income residents have limited access to health care, as detailed in the Profile. Contributors to this problem include: (a) reliance on entry-level jobs or service jobs, both of which are less likely to offer benefits; (b) ongoing job-loss, depriving individuals of income and health care concurrently; (c) fear of, and alienation from, the health care system; (d) lack of transportation, paperwork, and understanding of available resources and how to access them. Current resources are in danger of being severely cut, due to state and federal budget problems. These include: (a) Healthy Families insurance; (b) Medi-Cal; (c) Denti-Cal for adults; (d) funding for LCMH (which may have to cut or leave 18 positions open, plus cut the Drop-In Center staff to interns only); and (e) the CDDPP, which will end July 1, 2009.

*G (ii) Needs.* Lake County's health care needs are substantial and cannot be met by one agency. Access to health insurance is unstable; access to health care is increasingly precarious. Emergency room and urgent care overutilization divert resources from prevention and wellness, perpetuating the conditions which lead to health crises. Health professional shortages, especially the projected loss of dentists, require hospitals and other stakeholders to find incentives to recruit and retain young professionals. As Lake County's population ages, the demand for all types of health care will grow. The County's rugged geography and changing demographics strongly underline the need for more non-emergency medical transportation and greater access to health services at many locations.

The low-income community's specific needs with respect to health care begin with the need for a credible, convenient single-point-of-contact, i.e., the LCCAA, to help them navigate the health care system. Specific needs include: (a) assistance with finding a medical home, i.e., a family doctor; (b) assistance with insurance applications, eligibility, and other paperwork; (c) for a limited period, support and follow-up to make sure appointments are made and kept; and (d) transportation assistance.

## **H. Nutrition and Hunger (food insecurity).**

*H (i). Analysis.* Good nutrition is fundamental to lifelong health and well-being, from healthy infant brain development to an active, mentally-clear old age. Good nutrition requires access to healthy food, the time and skills to prepare it safely, a place to cook and store it safely, and the money to buy it. These resources are out-of-reach for many low-income individuals. Therefore, we are also coping with high rates of hunger and malnutrition, at all ages. Fortunately, healthy eating and access to quality food are high priorities for the entire community, not just the agencies directly serving the low-income community. The LCCAA has been able to build a four-component food program with

over 24 partners that serves the low-income community throughout the County and is offering nutrition education.

*H (ii). Needs.* The core needs in this area are straightforward: reliable access to food supplies sufficient to meet the demand, plus the storage, fuel, trucks, drivers, volunteers, and distribution sites to get it to those who need it. The Vitamin Supplement, the primary source of fresh fruits and vegetables for the LCCAA's food programs, has been exhausted. Since fresh fruits and vegetables are directly correlated with good nutrition and healthier weight, filling this gap is essential. The Lakeport Gleaners and the Hunger Task Force will be providing vegetables, at least in-season, but it is unknown whether they can meet the demand. Further, neither has reliable access to fresh fruit. Finally, our various partners may be at-risk of funding cuts which may affect their capacity to continue to participate in the LCCAA's food programs. As with many of the collaborative programs developed in Lake County, the loss of one partner can severely weaken the whole.

## **I. Child Care**

*I (i). Analysis.* The central importance of quality child care to healthy child development, parental employment, business productivity, and future community well-being is well-established. Quality preschool has been proven to be highly cost-effective and directly linked to higher educational attainment, among other benefits. The importance of quality after school care is increasingly well-understood. Such care protects children and youth during the critical after school period and allows parents to stay focused at work. Comprehensive, community-based after school programs for older youth are very important, as the critical after school period is the time when unsupervised youth experiment with drugs, alcohol, sex, crime, violence, gangs, and other risky behaviors. There is a continuing discrepancy between the amount of child care needed for all ages and that available.

*I (i) Needs.* The County's low-income population continues to rely on publicly-funded child care options. As discussed, demand is much greater than capacity and child care is not necessarily available when and where needed. In addition, there is no emergency or urgent response child care service, which is a significant barrier if someone is called to return to work or when a long-awaited job opportunity arises. Subsidized child care for individuals transitioning off welfare may be cut, which will create unemployment among the child care workers and the parents they formerly served. Nevertheless, while subsidized child care options continue to be available, low-income workers will need information about them, referrals, and follow-up to help them understand and choose among their options.

Older children (10-16) need comprehensive after school care, but there are few affordable, non-school-based options available to them. This is particularly true in summer, when most school-based programs are closed. The essential need is for Youth Centers in the various towns throughout the County that provide age-appropriate activities and supports, including homework help, quiet places to read and study,

recreation and games, healthy snacks and small meals, books, and violence-free and gang-free zones.

## **J. Quality of Life.**

*J (i) Analysis.* As discussed in the Profile, low-income communities and neighborhoods typically lack the amenities that more prosperous areas take for granted/ Lake County and its residents continue to struggle with quality-of-life and insufficient assets. Although each town is different, they have some common challenges, including: (a) no public community centers; (b) no public recreation programs; (c) no shuttle buses within each town and limited public transit between towns; (d) only two public pools for the entire County; (e) no YWCAs, YMCA's, or comparable facilities.

The County has some remarkable quality-of-life assets. Its unspoiled natural beauty, extensive forests and mountains, cleanest air in the state, and Clear Lake are highlights. These include: (a) a ring of beautiful County parks right on the lake, free and accessible to all; (b) Redbud and Austin Park in Clearlake, also free; (c) Westside Community Park in Lakeport; (d) Rodman Slough and other areas preserved by the Land Trust; (e) Anderson Marsh State Park and Audubon Sanctuary. Mt. Konociti is in the process of being preserved and protected for future generations. Most of the parks are free or charge a minimal fee. Various non-profits and the County have developed arts programs, museums, theaters, and the Taylor Observatory and Planetarium.

There are small recreation and activities programs for youth. Both Boy Scouts and Girl Scouts have troops here. Various private sports leagues operate, e.g., Konociti Basketball League, Kelseyville Soccer, and so forth. We have 4-H and Future Farmers. LCOE operates a comprehensive after school program for students aged 5-11; Lakeport has a comparable program. The LCCAA's Youth Services Program has filled the void created when the national organizations of the Boys and Girls Club and Big Brothers/Big Sisters forced closure of our local chapters. Hiking in the parks, forests, and woods, kayaking on the lakes, and fishing are free or low-cost recreational activities. Fishing is a major source of recreation, although it can be costly. The Senior Centers provide recreation, social activities and trips, and connections to resources. They also open their facilities to public meetings, conferences, benefits, etc., when feasible.

*J(ii) Needs.* The top needs are age-appropriate public recreation programs, more public swimming pools with longer hours, an Interpretive Center at Anderson Marsh State Park, and stable funding for the existing amenities and resources. The ongoing barrier is lack of transportation for low-income residents to use and enjoy the community assets available to them. In most towns and even the cities, it is impossible to walk to recreation. Very few streets have sidewalks. Many revert to unpaved, unlit roads just blocks from the center of town, including both the Cities of Clearlake and Lakeport. Extreme weather also makes it difficult for residents to get to and enjoy community life.

As noted, the LCCAA's Youth Center helps fill the gap left by the loss of the Boys & Girls Club and the lack of public recreation programs for youth. The existing Youth Center needs stable funding to maintain its services. Other communities would benefit from their own Youth Centers, which also require stable funding.

**K. Findings:**

The Profile and Needs Assessment results together generate the following key findings:

1. Despite significant advances and investment, Lake County lacks the in-depth human and institutional infrastructure to provide the services and supports the entire community needs to overcome poverty and create sustainable prosperity. The system lacks redundancy and back-ups. For example, if the Children's Dental Disease Prevention Program is eliminated, over 2,000 children and families will lose access to oral health care and other supports; providers will lose access to clients and income.
2. The recession and state budget crisis have destabilized employment and access to basic resources, such as affordable, decent housing, utilities, nutritious food, and health care. Middle class professionals are now homeless and enrolled in Welfare-to-Work job clubs. The safety net is threatened with cuts to public health insurance, health care, financial aid, Food Stamps, etc. Existing key providers are threatened with the loss of millions of dollars in revenues. For example, Lake FRC may lose \$1,000,000 if California enacts the proposed budget cuts. Lake FRC cutbacks will weaken Lake County's major source of safety net services for families uncomfortable with public agencies.
3. The level of collaboration among service providers continues to be one of the major assets of the service system. Lake County is recognized statewide for its pioneering commitment to collaboration. During the last 5 years, public and private entities have begun working more closely to maximize resources, as evidenced by the development of the Westside Community Park and the Westshore Community Pool. The collaborative network includes both informal linkages between professional providers and formal linkages documented by Memoranda of Understanding and Agreements. However, collaboration cannot compensate for inadequate financing.
4. The service system continues to operate "at, near, or just beyond the capacity of its current resources" (Heasley & Associates, p. 43, 1995). Despite the establishment of the LCCAA and the remarkable development of a relatively rich array of resources to serve residents of all ages and socio-economic conditions, needs still exceed capacity. Service providers remain highly dependent on continuing budget appropriations, grant funding, local revenues, and a strong economy, all of which are at risk of elimination or severe cuts.

5. Under current conditions, the LCCAA and its partners must focus on:
- (a) Maximizing and leveraging existing resources to maintain at least a basic safety net, while seeking new resources
  - (b) Helping clients to find, qualify for, and use available services efficiently, including case plans and case management, with the goal of achieving as much self-sufficiency as possible
  - (c) Maintaining good collaborative relationships, continuing our culture of mutual support despite the pressure to compete for limited resources
  - (d) Continuing to invest in assessments and planning to expand and enhance services in anticipation of economic improvement

**A. Assessment of Resources Providing Minimum Services.**

i. Services to help the poor complete required application forms. The LCCAA is the only agency which provides this assistance to the poor for all types of services. Other providers may assist the poor with applications for their particular service, e.g., Healthy Start assists low-income families to complete insurance paperwork and consent forms so their children can receive health care. Our trained staff and volunteers assist clients, either on a walk-in basis or by appointment. They help clients clarify their priorities, develop brief or long-term goals and plans to meet them, and then connect clients with services and resources. Staff develops relationships with clients and provides case management for those who need.

Some agencies and providers do assist their clients to complete required application forms. The community colleges assist students to apply for financial assistance for school. WIA, JobZone, and MiZone assist low-income clients to complete employment applications, school enrollment, and program applications, e.g., for Work Experience. Other agencies similarly take care of their own clients. However, the LCCAA's trained staff assists clients to complete whatever applications they bring in, from utilities assistance to employment.

II. Service to explain program requirements and client responsibilities. This service helps clients navigate the complex systems designed to help them. As noted, other agencies explain their own programs and requirements, but do not assist clients outside their purview. This "silo" approach creates a barrier for low-income individuals, who are required to go from agency to agency to find out what they have to do to receive help. The LCCAA trains its personnel to be familiar with the basic requirements of the core safety net programs or to know who to contact for information. Our updated Resource Directory ensures that staff and volunteers have current and complete information. The LCCAA's primary service delivery method is personal, one-on-one contacts between staff or volunteers and clients. In effect, the LCCAA serves as a one-stop shop for its clients. Each visit can answer many questions, avoiding the need for multiple trips. Given our clients' lack of transportation and many burdens, this service directly increases their access to the resources they need.

III. Service to provide transportation. The LCCAA has developed several strategies to provide or facilitate transportation, as follows:

(a) On a limited basis, the LCCAA provides bus passes and emergency gasoline. The LCCAA is continually seeking additional funding to continue this program, as need always outstrips resources.

(b) Given that most residents must rely on private vehicles, the LCCAA assists clients to obtain their drivers' licenses by allowing clients to use LCCAA telephones to make DMV appointments, keeps DMV handbooks for clients to study, offers access to practice tests on-line, and provides bus passes, on request, so clients can legally travel to the Lakeport DMV for testing. The Clearlake DMV office is only open one day per week; many clients must make the 52-mile round trip to Lakeport take the test. A valid drivers' license is a key step toward self-sufficiency in Lake County.

(c) The LCCAA and its collaborative partners also provide some transportation to hospitals, clinics, WIA, and other appointments using one of the LCCAA's vans with staff drivers, or with arrangements and resources provided by the other partners.

iv. Service to make programs accessible. The LCCAA is the only agency which is dedicated to providing open-ended, flexible services to do "whatever it takes" to make programs accessible to the poor, so they may become self-sufficient. Our trained staff and dedicated volunteers understand how to provide culturally competent services that respect the diversity of backgrounds and needs among the County's poor. For example, individuals from the culture of poverty are often reluctant to make and follow a plan that could challenge the family history and culture. Relationships are more important than success. Native Americans face the same challenge: personal ambition is seen as conflicting with tribal loyalty. Immigrants are often reluctant to come to the attention of any authority. Middle-class individuals who have suddenly become poor face a dual challenge: shock and shame, coupled with ignorance of the resources that can help them. The LCCAA's 14 years of continuous service give us credibility with, and access to, the low-income community and service providers alike.

The range of supports includes:

(a) One-on-one client contacts at our Clearlake headquarters, whether by walk-in or appointment. Trained staff works with clients to determine their specific barriers to self-sufficiency, e.g., no drivers' license, no high school diploma, hunger, unstable housing, lack of business clothes, or fear and alienation from systems in general.

(b) Classes at our headquarters and the Transition Shelter, so groups of clients can learn budgeting, money management, anger management, and other skills, while forming natural support networks.

(c) Making services available at multiple sites around the County to reduce the barriers of lack of transportation, time, and reluctance to be seen at the LCCAA



headquarters. For example, the LCCAA delivers food twice/monthly to 3 senior centers, 3 churches, and a grange. We also deliver food orders to a network of food partners throughout the County, including all of the senior centers, several churches, and agencies with pantries. The LCCAA is partnering with Sutter Wellness Foundation to bring its new mobile medical clinic to the food distribution sites. When clients make the investment in travel to pick up food, they will also receive screenings, check-ups, some treatment, and referrals to health care.

(d) Working with agencies, community groups, schools, local governments, and volunteers to identify gaps and find ways to fill them. Key examples of our successes include:

(i) Fruits and Vegetables Supplement to Food Program. The expanded food program, described in the Profile, which brings together the Redwood Empire Food Bank, Chic Le Chef, a local cooking and catering business, the Lakeport Gleaners, and a network of farmers and volunteers to enhance our food distributions with tons of fresh fruits and vegetables. As noted, the Lakeport Gleaners and the Hunger Project have stepped up to compensate for the exhaustion of the Vitamin Settlement funding, which paid for hundreds of pounds of fresh fruit and vegetables.

(ii) Youth Services of Lake County. This program started in July 2007. It operates a Youth Center in downtown Clearlake, which is open after school. The Center provides a safe, monitored, structured environment for youth. It also provides access to the mentoring and recreational activities formerly provided by Big Brothers/Big Sisters and the Boys and Girls Clubs of America. The national organizations of these groups imposed financial and service level goals which our small rural community could not meet, such as \$50,000 cash reserves. Therefore, our local chapters were closed. Both programs promoted healthy youth development by helping young people build self esteem, form positive peer groups, and develop pro-social values and skills. Youth Center, located in the heart of Clearlake, provides community-based comprehensive after school care, plus mentoring and recreation. This Center fills numerous gaps, especially the need for comprehensive, after school activities for older youth that provide a safe, gang-free alternative for them. Opening this Center required the support of the City Council. Lake Transit created a bus route from the schools to the Center, so children could get to the Center safely. The Rotary Clubs and volunteers donated landscaping and other items.

(iii) The Safe House of Lake County. This is Lake County's first and only (to date) source of transitional housing for homeless, runaway, and throwaway youth. It opened in 2009, after a three-year process. The LCCAA provided extensive logistical support throughout the planning process and provides administrative and fiscal oversight. Its services include: (a) opening and monitoring bank accounts for donations; (b) including Safe House funds in its independent audit; (c) coordinating the many donations of materials and labor

needed to make the program operational; (d) hiring, training, and supervising the on-site staff; and (e) seeking funding sources and blending funds from multiple sources to pay staff and operating expenses (within the permitted limits of each source). The building was donated by an anonymous community philanthropist. The all-volunteer Friends of the Safe House provided guidance, formed a non-profit which will assume responsibility for the Safe House in due course, and coordinated fund-raising. Rob Roy Golf Course subsidized the Annual Golf Tournament, with reduced costs. Community members and businesses Countywide donated to the live and silent auctions, furnished the house, and built cabinets and other installations for it.

(iv) New Beginnings. The LCCAA stepped up in 2006 to ensure the survival of the Drug Abuse Alternative Program which had been operated from Santa Rosa for 14 years. It had served over 490 women and 600 children. New Beginnings is the sole provider of prenatal alcohol and other drug abuse treatment for the non-Native American population in Lake County. By arrangement with Child Welfare Services, if the mother of a tox pos baby commits to New Beginnings' 10-month treatment program, the baby will not be removed. New Beginnings provides Prenatal Day Treatment services plus a Transitional Living Center located in Lower Lake. Mothers and children at risk of very poor outcomes receive services that turn their lives around. The specific services include: drug treatment and education; relapse prevention groups; after care counseling; education on the cycle of abuse and domestic violence awareness; Nurturing Parenting classes; therapeutic child care; and outpatient care. New Beginnings strongly emphasizes access to health and dental care for these women and children to compensate for years of self-neglect and child neglect due to the burdens of drug use. Mothers in New Beginnings also learn basic hygiene, cooking and housekeeping skills, budget and money management, vocational skills, and other skills to give them the capacity to become self-sufficient adults and caring parents able to provide economically and emotionally for their children. AODS is losing funding, so New Beginnings will have to seek other sources for its perinatal drug treatment services.

The LCCAA is the clearing house for ideas and concerns from all stakeholders concerned with the well-being of Lake County's low-income residents. It is the central link among providers, volunteers, government, and concerned citizens. As the examples above demonstrate, this constantly expanding network is creative, effective, and credible. The model gives the LCCAA the capacity to adapt to changing needs and priorities, so it can lead the network's response.

**B. Specific Information about how much and how effective assistance is being provided to deal with the problems and causes of poverty.**

The LCCAA has leveraged the core CSBG funding by over \$3 to every \$1 of CSGB funding. Last year's \$387,112 in CSBG funding was seed money for an operating budget of over \$2,403,000. In four years, our staff has grown from 6 employees to 25.

The LCCAA has become an incubator for community-driven programs, such as the Youth Center and the Safe House for Homeless, Runaway, and Throwaway youth.

The LCCAA operates a continuum of integrated programs that provide comprehensive assistance to the low-income community and those who seek to help them deal with the problems and causes of poverty, as follows:

**Food Programs:**

- ✓ Food Bank (24 Partner Distribution Organizations)
- ✓ LCCAA Emergency Food Pantries (2 locations)
- ✓ Commodities Supplemental Food Program (seniors and young children)
- ✓ Donations from Lakeport Gleaners and local farmers
- ✓ Nutritional education
- ✓ Christmas Food Boxes

**Clothing Closets:**

- ✓ Emergency clothing and shoes
- ✓ Business attire

**Christmas Toy Program**

**Transitional Shelter** (90-days of shelter and services for homeless individuals and families, with extensions under extraordinary circumstances)

**Information and Referral Program**, on-site by trained staff and volunteers

**Lake County Resource Directory**, updated annually and circulated to agencies

**Lake County Volunteer Exchange**, a new program to be started with North Coast Opportunities to establish a Lake County-based volunteer exchange network. NCO's model and partnerships will provide networking software, training, and staff funding. (Note: The Executive Director attended and contributed to the recent community-based Volunteer Summit, which provided direction, ideas, and contacts which will supplement the NCO project).

**Safe House for Homeless, Runaway, and Throwaway Youth**

- ✓ Multiple services on-site and through referral: health care, mental health, dental care, family reunification, transportation, alcohol and other drugs counseling, other counseling, and exit planning, to include stable housing
- ✓ "House Mother" services
- ✓ Support groups
- ✓ Advocacy and fund-raising, with community groups and volunteers

**Youth Center**

- ✓ Age-appropriate activities for youth aged 10-16
- ✓ Teen activities, such as dances

- ✓ After school programming, including homework help, quiet places to study and read, games, recreation, nutritious snacks/small meals
- ✓ Nurturing friendships
- ✓ Program planning to expand to Middletown and Clearlake Oaks

**New Beginnings**, residential and day treatment for mothers who have drug and alcohol involvement

- ✓ Day Treatment for TLC residents and other women
- ✓ Child care and meals during the day while mothers are in classes
- ✓ TLC House – Transitional living with supportive services
- ✓ Grandparents Program, to help support the at-risk children and strengthen the extended family
- ✓ Transportation for medical appointments, classes, job interviews, etc.
- ✓ School-based programs
- ✓ Highlands High School satellite program for high-risk teens, in partnership with the Konocti Unified School District
- ✓ After Care, to help graduates stay clean, sober, and on track to achieve their goals
- ✓ Alumni Program, to honor graduates and demonstrate to new clients that the program works

Highlights of 2008 results include:

- ✓ 26 participants were employed and obtained an increase in employment income, 6.5 times the number projected to do so (4)
- ✓ 496 participants obtained pre-employment skills, ABE/GED, post-secondary education, enrolled children in child care, etc., i.e., successfully obtained employment supports to prepare themselves to secure and maintain employment
- ✓ \$32,568 in aggregate dollar savings on utilities and telephone use, generated by 89 participants
- ✓ 33 individuals opened a savings account, although the amounts were unknown
- ✓ 15 clients participated in formal or non-governance community activities, beginning the habit of advocacy and community engagement
- ✓ The LCCAA expanded its partnerships to 50, of which 11 were faith-based. Partnerships are the key to leveraging the CSBG core funding and strengthening the service continuum for low-income individuals
- ✓ The LCCAA was able to attract \$316,000 in local public funding, \$320,440 from private sources, and \$60,800 in volunteer time
- ✓ The LCCAA served 6,043 seniors who remained able to live independently, saving the public significant Medi-Cal and other costs.
- ✓ The LCCAA served 531 individuals with disabilities who remained able to live independently.
- ✓ 12,780 households received food (some more than once)
- ✓ 46 households received temporary shelter.
- ✓ 50 children participated in preschool, most in Head Start. The quantified net benefits of quality preschool, over the lifetime of the child, are at a minimum

\$10,410 per child or \$520,500, i.e., an amount greater than the entire CSBG allocation (Update to Lake County Children's Report Card, p. 74).

- ✓ Assuming a minimum of 30 children participated consistently in the after school program, we saved the public an estimated \$8.90 to \$12.90 for every dollar spent (based on State of California ASES calculations; Update to Lake County Children's Report Card, p. 96).

### **C. Establishment of priorities for the best and most efficient use of CSBG resources.**

The LCCAA uses a decision matrix to establish its priorities, which is revisited at least annually. The critical constraint is the LCCAA's very limited resources, which could easily be consumed by any one of the needs described in the Profile and Needs Assessment.

The factors used are:

- (1) Whether the project, activity, or area is prioritized by the low-income community, as expressed directly during the annual hearings or surveys or indirectly through demand for specific services;
- (2) Whether the proposed priority affects more than one generation or more than one group. For example, New Beginnings benefits both mothers and children and will have multiple, long-term impacts on the women, their children, and their communities as both groups will be contributors to, rather than consumers of, public resources;
- (3) Whether the proposed new priority is feasible, cost-effective, and will engage community support;
- (4) Whether the LCCAA can use existing resources to deliver the proposed service;
- (4) The extent to which the proposed priority can be sustained, including the scope and stability of contributions from collaborative partners;
- (5) Whether a proposed new priority is consistent with the LCCAA's mission and likely to strengthen its existing projects. Because there are so many needs and gaps in Lake County, the LCCAA has to carefully consider each proposed activity to avoid becoming so stretched that existing services and/or the agency's overall strength are damaged.

The Executive Director, Board members, staff, volunteers, and community partners are open to suggestions from the community, in keeping with the LCCAA's philosophy of creating opportunities for individuals to take leadership in their communities. All proposed priorities are analyzed by the Executive Director, who presents the results of her analysis to the Board at its monthly meetings. The Board reviews and considers proposed priorities and may adopt, reject, and request additional analysis before

moving forward. Again, due to limited resources, some potentially exciting options have to wait their turn, as the Safe House did. During such waiting periods, the LCCAA's Executive Director typically coordinates the initial planning process and recruits community partners to advance the proposed priority. If and when such partners fail to step up or the process loses momentum, which indicates that the proposed new activity is not, in fact, a community priority at this time. Efforts are redirected toward more viable options. We cannot afford to be seen as "wasting" the community's time or losing sight of our primary mission.

#### **D. Process used to collect most applicable information for inclusion in the Needs Assessment.**

The LCCAA uses both objective and subjective methods to ensure that our Needs Assessment reflects the current priorities of the low-income population throughout Lake County. First, we collect objective data year-round for the Profile from a wide range of sources, as summarized above. This process lets us track indicators and trends in multiple domains relevant to the low-income population. It alerts us to changes that may affect the priorities of the low-income community, such as the potential loss of Medi-Cal for adult dental care or the growing need for bilingual, multi-cultural staff and programs. We can cross-check this information with other objective indicators, such as changes in demand for particular services (measured by requests for services and numbers of client served), changes in the composition of our client population, demographic changes (measured by the U.S. Census, public schools, etc. When collated, this information clarifies the most current needs of our population.

Objective information is enriched by subjective sources. Our clients' own feedback is critical to our understanding of what their priorities are and how well their needs are being met. We receive feedback directly from: (1) evaluations from classes, workshops, and other activities; (2) bi-annual client surveys provider surveys, created locally; (3) client visits, telephone calls, and emails; and (4) the 5 bi-annual local public hearings which are held at various locations around the County. Client surveys are handed out at the Food Pantry, public meetings, to all clients who come into the office, and to partner agencies to circulate. Provider surveys are circulated to all non-profits, by hand or mail.

The LCCAA also relies on information from its collaborative network. Many of our partners conduct their own assessments, either annually or for specific purposes. For example, the HLN is in the process of surveying the community regarding the most-needed recreational activities, by age-group. El Bien Estar de Familiar-Latina (The Wellbeing of the Latino Family) recently surveyed the Latino community regarding its needs. The Child Care Planning Council surveys the child care work force on wages, benefits, education, working conditions, etc. 1<sup>st</sup> 5 surveyed the low-income community on its child care needs and utilizations. Healthy Start holds an annual, open, community assessment of the health care needs of low-income children and families. Our partners use their assessments to create their own Strategic Plans, which are increasingly shared and networked to maximize their effectiveness. These activities occur on a

rolling basis year-round. The LCCAA participates in many of them and receives copies of the results. The reciprocal flow of information provides constant feedback on the status and priorities of the low-income community overall and subgroups within it, such as single mothers, the "new homeless", Latinos, older adults, etc.

Finally, we consult local, state, and national assessments and research. Local sources include the Lake County Children's Report Card, the Area Agency on Aging 5-Year Needs Assessment, the Child Care Planning Council's 5-Year Needs Assessment and Strategic Plan, the 1<sup>st</sup> 5 Lake Assessment and Strategic Plan, the annual Healthy Start assessment, among others. Research sources include: (1) the California Healthy Kids Survey; (2) the UCLA Health Policy Center; (3) the California Health Interview Survey; (4) the RAND Children's Policy updates, among others. Staff attend workshops on poverty, culturally competent services, drug addiction, asset development, adverse childhood experiences, child abuse reporting, and others, which provide us with broader perspectives and improved understanding of the needs of various populations and best practices to meet them.

**E. Agency process for periodically reviewing and revising the needs assessment.**

The periodic review and revision of the Needs Assessment is concurrent with the review and update of the Community Information Profile and uses the same methodology.

**F. Conclusion**

Lake County's needs outstrip its resources at the best of times. The low-income community is increasingly challenged and is growing as members from the middle class are forced into poverty. Further, we are losing programs in their entirety and others are severely reduced due to state and federal budget cuts. The LCCAA is the hub of the service continuum for the low-income community, linking agencies, volunteer groups, key leaders, and decision-makers. It is the only such link and is only able to provide this unique and vital service because of the stability of the core CSBG funding.

## Requirement 2

### 2010/2011 STATEWIDE PRIORITY/STRATEGY STATEMENT Government Code Section 12745(e)

Does your Agency accept the Family Self-Sufficiency Statewide Priority? ☒ Yes ☐ No

1. What is your agency's definition of Family Self-Sufficiency?

Our agency defines family self-sufficiency as the achievement of at least a modest standard of living sufficient to provide: (a) decent, safe housing; (b) secure supplies of healthy, nutritious food; (c) health care for all family members; (d) stable work, with a career path leading to meaningful and gainful employment; (e) access to educational options suitable for each family member, including developmental child care; (f) access to healthy youth development options; (g) a family safety net, including a savings account and money management skills; and (h) sufficient internal and external assets to give back to the community, at times and in ways selected by the individuals.

2. Attach or type a narrative description of the strategies utilized to support and achieve the Family Self-Sufficiency priority.

Our global strategy is to take a holistic approach to family self-sufficiency. Our Profile and Needs Assessment demonstrate how the many causes and contributors of poverty are interlinked and mutually reinforcing. Therefore, our interventions are carefully structured to break those links and create a mutually reinforcing upward spiral of change. The CSBG funding is the heart of this global strategy. It provides the stable platform from which the LCCAA is able to launch programs, provide personal services, develop relationships with clients, leverage funding, attract collaborative partners, and earn credibility with the community. Our primary delivery strategy is the personalized, one-on-one services and supports our trained staff and volunteer provide to our clients, meeting a continuum of needs, in all domains. Our specific services and supports that help us work toward the State priority are detailed in Requirement 3 and the NPIs. Our services strategy is, either directly or through referrals, to address our clients' emergency needs, while helping them develop a vision and a plan to go beyond surviving to thriving. We stabilize clients with food; shelter; clothing; help with utilities, mortgage, and rent payments (with new funds); and personal counseling and support. Over time, we help clients identify educational and job goals, link them to services, and help them overcome barriers, such as lack of clothing and experience with business etiquette. We provide access with referrals, follow-up, and transportation. We demonstrate our respect for, and commitment to, the low-income community by hiring former clients and program graduates. Our holistic approach recognizes that when individuals are self-sufficient, they pay more taxes, volunteer more, and contribute to the quality of life for themselves and the entire community. Therefore, we actively recruit and support individuals (including youth and seniors) who want to become involved in planning and implementing programs, advocacy, and civic engagement.

Over time, our self-sufficient families directly contribute to community well-being, creating stable, prosperous neighborhoods with high quality-of-life. We will see safe housing, sidewalks, public recreation programs, quality child care, youth development activities,



seniors integrated into community life, and so on. Children who can walk with their parents to a public recreation program in a beautiful, safe park will be healthier, both in the short-term and as adults. They will do better in school and be more likely to at least graduate from high school. As documented, higher educational attainment is directly linked to higher lifetime earnings. Successful individuals escape the culture of poverty for themselves and their children. Their children have a better chance of being healthy, well-nourished, well-developed, and successful at school and life. When the cycle of poverty is broken for a family, it is also broken for the community. Each personal success takes the entire community forward. Each LCCAA activity and strategy is chosen for its capacity to contribute to this global strategy

3. If your agency rejects the statewide priority, state the reason(s) for your agency's rejection. **N/A**

**Requirement 3**  
**FEDERAL ASSURANCES**

COATES Human Services Reauthorization Act of 1998: Public Law 105-285

→ **NOTE: OUR NARRATIVE DESCRIPTION IS ATTACHED  
FOLLOWING PAGE 3 5.**

To the left of Federal Assurances 676(b)(1)(A-C) please indicate what activities your agency administers by placing a check in the box provided. In addition, attach or type a narrative description for the agency activities, as applicable, in accordance with the Federal Assurances 676(b)(1)(A) and 676(b)(1)(B).

**1. Section 676(b)(1)(A):**

To support activities that are designed to assist low-income families and individuals, including families and individuals receiving assistance under part A of Title IV of the Social Security Act (42 U.S.C. 601 et seq.), homeless families and individuals, migrant or seasonal farm workers and elderly low-income individuals and families, and a description of how such activities will enable the families and individuals—

- ☒ i. remove obstacles and solve problems that block the achievement of self-sufficiency, (including self-sufficiency for families and individuals who are attempting to transition off a State program carried out under part A of title IV of the Social Security Act);
- ☒ ii. secure and retain meaningful employment;
- ☐ iii. attain an adequate education, with particular attention toward improving literacy skills of low-income families in the communities involved, which may include carrying out family literacy initiatives;
- ☒ iv. make better use of available income;
- ☒ v. obtain and maintain adequate housing and a suitable living environment;
- ☒ vi. obtain emergency assistance through loans, grants or other means to meet immediate and urgent family and individual needs; and
- ☒ vii. achieve greater participation in the affairs of the communities involved, including the development of public and private grassroots partnerships with local law enforcement agencies, local housing authorities, private foundations, and other public and private partners to;
  - ☐ I. document best practices based on successful grassroots intervention in urban areas, to develop methodologies for widespread replication; and;
  - ☒ II. remove obstacles and solve problems that block the achievement of self-sufficiency, (including self-sufficiency for families and individuals who are attempting to transition off a State program carried out under part A of title IV of the Social Security Act);

**2. Section 676(b)(1)(B):**

To address the needs of youth in low-income communities through youth development programs that support the primary role of the family, give priority to the prevention of youth problems and crime, and promote increased community coordination and collaboration in meeting the needs of youth, and support development and expansion of innovative community-based youth development programs that have demonstrated success in preventing or reducing youth crime, such as—

- ☐ (i) programs for the establishment of violence-free zones that would involve youth development and intervention models (such as models involving youth mediation, youth mentoring, life skills training, job creation, and entrepreneurship programs); and
- ☒ (ii) after-school childcare programs.

**3. Section 676(b)(1)(C):**

- ☐ To make more effective use of, and to coordinate with, other programs related to the purposes of this subtitle (including State welfare reform efforts). **N/A**

**Attach or type a narrative description of the agency activities for each of the Assurances listed below:**

**→NARRATIVE DESCRIPTION ATTACHED AFTER P.11.**

- 1. Section 676(b)(4):** Will provide, on an emergency basis, for the provision of such supplies and services, nutritious foods and related services, as may be necessary to counteract conditions of starvation and malnutrition among low-income individuals.
- 2. Section 676(b)(5):** Entities will coordinate and establish linkages between governmental and other social services programs to assure the effective delivery of such services to low-income individuals and to avoid duplication of such services and a description of how the State and eligible entities will coordinate the provision of employment and training activities, as defined in section 101 of such Act, in the State and in communities with entities providing activities through statewide and local workforce investment system under the Workforce Investment Act of 1998.
- 3. Section 676(b)(6):** Will ensure coordination between antipoverty programs in each community in the State, and ensure, where appropriate, that the emergency energy crisis intervention programs under title XXVI (relating to low-income home energy assistance) are conducted in such community.

- 4. Section 676(b)(9):** Entities will to the maximum extent possible, coordinate programs with and form partnerships with other organizations serving low-income residents of the communities and members of the groups served by the State, including religious organizations, charitable groups, and community organizations.
- 5. Section 676(b)(10):** Each eligible entity to establish procedures under which a low-income individual, community organization, or religious organization, or representative of low-income individuals that considers its organization, or low-income individuals, to be inadequately represented on the board (or other mechanism) of the eligible entity to petition for adequate representation.
- 6. Section 676(b)(12):** All eligible entities will not later than fiscal year 2001, participate in the Results Oriented Management and Accountability System (ROMA), or another performance measure system for which the Secretary facilitated development pursuant to section 678E(b), or an alternative system for measuring performance and results that meets the requirements of that section, and a description of outcome measures to be used to measure eligible entity performance in promoting self-sufficiency, family stability, and community revitalization.
- 7. Section 678D(a)(1)(B):** Ensure that cost and accounting standards of the Office of Management and Budget apply to a recipient of the funds under this subtitle.
- 8. Section 676(b)(3)(A):** Provide a description of the service delivery system, for services provided or coordinated with funds made available through grants under section 675C(a), targeted to low-income individuals and families in communities within the State.
- 9. Section 676(b)(3)(B):** Provide a description of how linkages will be developed to fill identified gaps in the services, through the provision of information, referrals, case management, and follow-up consultations.
- 10. Section 676(b)(3)(C):** Provide a description of how funds made available through grants under section 675C(a) will be coordinated with other public and private resources.
- 11. Section 676(b)(3)(D):** Provide a description of how the local entity will use the funds to support innovative community and neighborhood-based initiatives related to the purposes of this subtitle, which may include fatherhood initiatives and other initiatives with the goal of strengthening families and encouraging effective parenting.

**Requirement 3**  
**FEDERAL ASSURANCES**

**COATES Human Services Reauthorization Act of 1998; Public Law 105-285**

1. Section 676(b)(1)(A)

(i) Remove obstacles and solve problems that block achievement of self-sufficiency.

The LCCAA's entire program is dedicated to enabling low-income families and individuals to achieve self-sufficiency by providing services and supports that address the specific obstacles and problems that block them from doing so. The LCCAA's first strategy is its location, in downtown Clearlake, the County's largest population Center. It is on a main bus route and within walking distance of a large grocery store, the County's largest health clinic (offering general medical, dentistry, obstetrics/gynecology, pain management, and other services), Lake County Mental Health's Clearlake Clinic (scheduled to be closed), and various restaurants. It is about 5 miles from the Lake County Department of Social Service's ("DSS") headquarters where they can enroll for welfare assistance, Food Stamps, Medi-Cal, CalWORKs, and other services. Clients can coordinate their trips to the LCCAA with other services to more efficiently use their time and expenses.

The LCCAA has become the County's central clearing house for information on services available to the low-income community. Staff review job listings in the newspapers, monitor County job postings, subscribe to the community college catalogs, and track the services provided by others to the low-income community, such as Nurturing Parenting classes, tobacco cessation, and so forth. Fliers are posted in our offices and clients are welcome to use our telephones and computers to contact providers and enroll in activities.

The LCCAA also provides a regularly-updated Resource Directory for agencies, which is also available for clients' use. It is available on CD or hard-copy and is also posted on-line. It will be posted on the LCCAA website, which is under construction. The Directory is linked to the County of Lake's website. The DSS's Eligibility Workers and staff use the on-line version when working with low-income individuals and families. The Directory is a tool created by the LCCAA that helps agencies work together more effectively, integrate services, and help low-income individuals achieve self-sufficiency, including transitioning off State (and federal) programs.

The LCCAA is now dealing with two types of poverty: (1) generational poverty, in which families have been in poverty for at least 2 generations (the "culture of poverty"); and (2) the sharply-rising "situational poverty", in which individuals or families lack resources due to a particular event (death, foreclosure, job loss, divorce, illness or injury without insurance). Individuals from the culture of poverty focus on relationships to the exclusion of achievement; individuals in situational poverty are often in denial and refuse to accept help ("charity") (Payne, R., A Framework for Understanding Poverty, 4<sup>th</sup>

ed., aha Press, p. 47). However, both groups are more likely to respond to direct, personal assistance in a supportive, relationship-focused setting.

Therefore, the LCCAA's approach is geared to enabling staff to form positive relationships with our low-income clients. Clients are greeted at the door by staff or trained volunteers. Many of the volunteers were formerly clients; some of our staff are also former clients. These role models prove to our new clients that our services work and they, too, can overcome the challenges in their lives. Some services are only available by appointment, e.g., pre-qualification for Food Stamps, while many others are available via walk-in. Staff and volunteers are trained to help clients clarify what they need, prioritize their needs, create straightforward goals and plans to meet them, and then link clients to the identified services and supports. Volunteers ask staff to assist in cases where more clarification is needed with respect to prioritizing needs, plans, and goals. Staff has better training to help clients. This general approach is applied to every category of service, from employment supports to civic engagement.

(ii) Secure and retain meaningful employment. A job is only the first step toward self-sufficiency. Clients need to plan a career path that leads to gainful and meaningful employment at a self-sufficient wage, with access to health insurance and other benefits. However, securing and retaining any job is a significant challenge, exacerbated by the current economy. Therefore, the LCCAA invests time and effort to provide employment supports, primarily through referrals and follow-up. These include: (a) pre-employment skills/competencies and certificates; (b) ABE/GED completion; (c) post-secondary education opportunities; (d) before and after school programs, including an after school center; (e) child care and care for adult/disabled dependent, through referrals to DSS's In-Home Health Services and local adult daycare; (f) transportation/driver's license supports, described above; (g) health care, including the new Wellness Center's Mobile Clinic; (h) safe and affordable housing; and (i) food assistance. These supports were described in the Profile and Needs Assessment, including an analysis of how they facilitate employment.

Our **pre-employment skills/competencies** services include linking clients to The Arbor and the Career Center for help in preparing résumés and job applications and understanding interview techniques. We offer job readiness "soft skills" training on topics such as punctuality, business dress, telephone etiquette, and work-related social skills. We also provide access to a computer for on-line job searches and a telephone to use to make appointments and obtain information. On request, staff will review résumés before clients submit them.

We refer clients to **employment-related services and resources**, such as: (a) On-the-Job training supported by DSS; (b) AmeriCorps, which trains and places members in schools and other service positions; (c) the One-Stop Career Center, which offers employment counseling, vocational testing, and other services, including a youth summer program; (d) JobZone, a public-private partnership with The Arbor and DSS providing one-stop career center-type services in the Clearlake area for welfare-to-work

clients; and (e) LCOE, which offers GED preparation classes, Regional Occupational Program, and career technical education.

The LCCAA provides **education services** through referrals. ABE/GED completion services are provided by the Districts' adult schools, LCOE, the Career Center, and JobZone. Post-secondary education options include college and career technical education. Our colleges offer programs that award certificates for specific competencies, such as accounting, welding, etc. As clients earn certificates, they qualify themselves for more meaningful and gainful employment on a career path.

LCCAA's direct services to assist clients to secure and retain employment focus on two key areas: emergency food assistance and housing assistance. Food is fundamental. Individuals who are well-nourished and who do not have to worry about their children or dependents have the stamina and mental focus to seek employment, to complete the requirements to qualify for a job, and to meet the physical and mental demands of a job. Food security also helps individuals and their families survive during the period between being hired and being paid.

The LCCAA operates the only food bank in Lake County. We are a Partner Distribution Organization of the Redwood Empire Food Bank of Santa Rosa, an affiliate of Feeding America (formerly, Second Harvest). As discussed above, we have expanded our food program to include local donations of fresh fruits and vegetables in our distributions to seniors and low-income families Countywide. Given the high cost and health benefits of daily consumption of fresh fruits and vegetables, we believe this expansion is a valuable enhancement to this program.

We also operate two Emergency Food Pantries distributing a basic food package on a drop-in basis. We allow clients to receive food more often, while still trying to serve as many unduplicated clients as possible. We deliver food twice per month at our network of senior centers, churches, and others. Deliveries are made to two different population groups: (a) under the Commodity Supplemental Food Program, to seniors, children aged 0-5, and children no longer eligible for WIC; and (b) under Farm-to-Family, to low-income individuals and families of any age.

Finally, we sell from our Food Bank to senior centers, faith-based organizations, and other non-profit organizations that provide food assistance to low-income clients. We charge only a share of cost to cover fuel and truck costs. The LCCAA has become the County's central source of emergency food.

The LCCAA directly provides Transitional Housing for adults and families and administers the Safe House of Lake County for homeless, runaway, and throwaway youth. There are no homeless shelters or emergency housing in the County. Our Transitional Shelter is the only one in the County. It has five units with a total capacity of about 18. However, cribs and bassinets can increase capacity if the families have infants and very young children. Residents receive over 90 days of shelter and support. One staff member oversees the shelter. She helps residents clarify their goals, assists

them with housing and job applications, and keeps them on track to meet their goals. The shelter requires mandatory drug testing.

The Shelter program is designed to foster self-sufficiency. Residents are transitioned from dependency to increased autonomy. For example, they receive guidance in money management. They are encouraged to open savings accounts and save for rent and security deposits while still in the Shelter. The LCCAA holds their deposits in an escrow account until they leave the Shelter. They must contribute hours each week to maintain the property, in effect, paying rent and contributing to their community. Residents who are actively pursuing a job search, in school, or have community service commitments are given flexible schedules. In addition, DSS has agreed to provide Section 8 vouchers for Shelter clients, as available. DSS notifies the LCCAA when the Section 8 list is being opened. The LCCAA then provides the shelter residents with the preliminary applications and assistance to complete them. When residents leave, they do so with housing in place. They are allowed to take their bedding and towels with them, reducing the cost of re-entry into the mainstream.

Assistance with utilities supports employment by ensuring that clients have access to light, heat, and hot water. They can get up, get ready, and be at work, on time and clean. Children are much more likely to go to school if they know they can be clean and dressed in clean clothes. Further, local governments are now "red tagging" homes in which the water has been cut off and forcing evictions. When people are suddenly homeless and lose their possessions, they are destabilized at work and school. Our socio-economically marginal clients are very vulnerable to dislocation at the best of times. Ensuring that they have stable housing is a cost-effective method to help them stay on track toward self-sufficiency and maintain family cohesion. The LCCAA pays water bills directly and helps clients apply for LIHEAP, which is administered by NCE.

(iii) Attain an adequate education. The LCCAA's staff works with clients to help them improve their educational attainment and transition to self-sufficiency. About 20% of adults read at 5<sup>th</sup> grade level or below. Job applications, internet searches, health care directions, referral forms, checking account agreements, and so forth are difficult for them and may be so daunting that they give up. Staff provides encouragement and interim assistance with completing forms. We also post the class schedules for our two community colleges in our headquarters.

However, most of our services in this area are done via referrals. Our key referral partners are:

- (a) Lake County Adult Literacy Program, a program that matches clients with trained, volunteer tutors;
- (b) LCOE, which coordinates GED test preparation and testing
- (c) Lake County One-Stop Career Center (WIA) and JobZone, both of which provide educational supports for clients, such as financial aid for books, transportation, fees, materials, and the like.



- (d) Yuba College – Clearlake Campus and Mendocino College- Lakeport Campus, both of which offer assistance with financial aid and personal education planning
- (e) The Adult Schools operated by the various districts, which offer re-entry adults the opportunity to earn their high school diplomas (a valuable option, as some employers strongly prefer high school diplomas to GEDs).
- (f) AmeriCorps, which places members in various service positions, provides references and job experience, pays stipends, and contributes cash toward post-secondary education when members complete their terms of service.

Staff helps clients identify their most important educational needs and goals and then select the most feasible services to attain them. Staff also remains available to counsel clients when problems occur and help them overcome barriers which may arise, such as loss of transportation, conflicts, loss of child care, and so on. Most of our clients are coping with multiple concurrent challenges, so barrier removal and simple personal support are crucial to helping them stay with their programs.

(iv) Make better use of available income. Most of Lake County's low-income residents have few or only periodic reserves and a very fragile economic safety net, which is at risk of severe cutbacks. They are extremely vulnerable to economic crises and setbacks. Therefore, the LCCAA works closely with Shelter clients or drug treatment outpatient clients to help them learn how to make better use of their available income. Teaching clients how to manage their money is the first step. The process begins at housing intake, when staff help clients with their budgets and encourage them to start saving. Staff works one-on-one and in groups with the residents in the Transitional Shelter to show them how to complete a budget. Staff assists Shelter clients to stay "on-budget", giving them at least 90 days of guidance and support before they re-enter the community. Classes on budgeting are provided by knowledgeable community volunteers or program staff. These classes are given to transitioning clients, but are open to all low-income clients who are interested in the information.

Our other key strategy is to encourage low-income clients to open savings accounts. [Note: Banks do not allow individuals with bad credit to open checking accounts.] Our clients have told us that they have never felt that they could have a savings account – either not enough money or not enough discipline. Yet, our clients urgently need their own safety net, however small. Any kind of unexpected expense, such as having to replace tires or brakes, can be a disaster. Without a reliable car, people can't get to work. Unreliable employees get fired. The budgeting classes include techniques to get clients in the habit of saving, e.g., signing of up for automatic savings account deposits, "paying yourself first", putting each week's change in a jar, etc. Even \$200 - \$500 is a very significant safety net for our clients. As noted, the LCCAA holds Shelter residents' savings in an escrow account for them until they leave the shelter.

Finally, we link clients to tax preparation information. Many, if not most, clients do not have to file tax returns. If they fail to do so, however, they cannot claim any tax credits for which they are eligible. Given the rising costs of living, our clients need to utilize all income available to them. We encourage clients to deposit any credits or refunds in

their savings accounts. If they cannot deposit the entire amount, we encourage them to save at least some of it. Often, clients will delay making a major expenditure or repair, such as replacing worn-out tires, until they receive a lump sum. Incremental savings gives them a nest-egg to make such repairs in a timely way. Encouraging clients to build up savings leads to community development, as they are able to return the money back into the local economy by purchasing goods and services from local businesses.

(v) Obtain and maintain adequate housing and a suitable living environment.

*Housing.* Despite significant investment, Lake County lacks enough affordable, decent, safe housing to meet the need. Many low-income individuals and families are cobbling together unsatisfactory solutions, living in travel trailers in trailer parks or spending winters in resorts built for summer time use. The City of Clearlake continues its practice of "red tagging" homes that fail to meet basic standards, such as having a water supply. Residents who cannot pay the water bill may find themselves homeless. However, the LCCAA's very limited resources cannot pay for, weatherize, or construct housing for all those who need it. Instead, we rely on referrals, linkages, advocacy, and partnerships for most solutions.

We assist residents to find housing in a variety of ways. We network and advocate for low-income clients who qualify for Section 8 supported housing. DSS has agreed to make Section 8 vouchers available to our Transitional Shelter clients, as available. We collaborate with Habitat For Humanity and with the Konocti Unified School District to help suitable families build their own homes.

To help clients maintain adequate housing, we refer them to other service providers who can help them with landlord-tenant issues, legal aid services, and assistance with code enforcement citations and mandatory home repairs. NCE provides weatherization. The LCCAA is exploring how to establish an in-County weatherization program.

To assist low-income individuals obtain and maintain a suitable living environment, the LCCAA:

(a) Refers clients to North Coast Energy (in Mendocino), the LIHEAP provider for Lake County. Staff assists clients to complete the applications and forwards the completed applications directly to North Coast Energy, saving the client time and postage. LIHEAP funding is usually exhausted before the fiscal year ends, however.

(b) Using Emergency Food and Shelter funding, assist clients to pay water bills. Like LIHEAP, this funding cannot meet the need. Clean water is essential for health, safety, and cleanliness. Clean children go to school; clean adults go to work. As noted, houses without water will be red-tagged and their residents evicted, so this intervention has multiple benefits.

(c) Contingent upon receipt of ARRA funding and in collaboration with the City of Clearlake, the LCCAA has the capacity to assist some local families with home repairs to avoid code citations and to maintain a suitable living environment, e.g., window repairs, door locks, etc.

In addition, we operate the County's only Transitional Shelter and administer its only Safe House for homeless, runaway, and throwaway youth. The Transitional Shelter Program was discussed above. Staff alert residents to housing opportunities and assist them to complete applications.

The Safe House has a maximum capacity of 6 youth. It is located in a residential neighborhood in a beautiful house with extensive grounds and a two-car garage. The neighbors have accepted the house. It opened in February 2009 and runs near-capacity. One of the youth residents successfully graduated from high school this Spring. The LCCAA provides fiscal and administrative oversight. It coordinates the various volunteers and community groups supporting this project. Eventually, the LCCAA expects to transition full responsibility for the Safe House to the Safe House of Lake County, Inc. One of the Safe House's top goals for each resident is to ensure that every youth has secured safe, stable housing before he or she leaves the Safe House.

Finally, we advocate for the housing needs of low-income residents. The LCCAA includes housing needs in its assessments and plans. It advocates with the City Councils of Clearlake and Lakeport and the Board of Supervisors to ensure that the housing needs of the low-income community are incorporated into their plans, such as the Lake County Housing Element. The LCCAA is working with the Board of Supervisors to secure land, permits, utilities, and funding to develop a planned community (working title: "Non-Profit Village"), with emergency, transitional, and supported housing options co-located with key services. The development will be "green" and is intended to be a net-energy producer when completed. We have been offered a free Feasibility Study, tentatively scheduled for completion in 2009-2010. This Study will tell us if the Non-Profit Village is a realistic project.

(vi) Obtain emergency assistance to meet immediate and urgent family and individual needs. The LCCAA is the central emergency safety net provider for Lake County, stepping in to stabilize individuals and families while they seek longer-term support. We can provide a wide range of resources. We can respond rapidly, unlike the various other aid providers who must meet state and federal mandates first. Further, the LCCAA has earned the respect and trust of the low-income community, many of whom are reluctant to seek help from agencies linked to government. Therefore, when crisis strikes, whether natural or man-made, the LCCAA is able to assist, minimizing the impact of the event and helping individuals and families stay on the path to self-sufficiency.

The daily emergency assistance that we can provide consists of:

- (a) Food from our two Food Pantries, distributed on a drop-in basis to individuals who complete a brief application. As noted, we strive to serve as many different individuals as possible, while recognizing that many of our clients are in chronic crisis.
- (b) Temporary shelter, usually via motel vouchers for 1-3 nights
- (c) Bus passes or gasoline assistance. Bus passes are usually given to clients for job interviews and medical appointments.
- (d) Clothes and household goods. Our Clothes Closet provides clean clothes and shoes for clients and their children to help them live with dignity while recovering from the crisis.

Twice each month, our Commodities Supplemental Food Program delivers food boxes to families with children aged 0-5 or children who no longer qualify for WIC and seniors in various locations around the County. We coordinate our Hub-&-Spoke deliveries with the CSFP food box distributions, to provide a more complete nutrition package that includes protein sources plus fresh vegetables and fruits. Hub-and-Spoke food deliveries are available to individuals and families of all ages and compositions.

In addition, the LCCAA is one of the lead participants in the County's Disaster Preparation Plan, together with the Office of Emergency Services, the American Red Cross, the two hospitals, the fire departments, the police, the schools, Animal Control, and the County's amateur radio clubs. The Plan specifies the areas in our community which can shelter clients and pets and accommodate the medically fragile. Typically, schools are designated mass shelters. The LCCAA is a key provider of mass care, i.e., planning and delivery of meals and water distribution for low income individuals, families and seniors. The Plan also provides for Continuity of Operations, i.e., finding an alternate location if the LCCAA is forced to evacuate its current location.

(vii) Enabling low-income residents achieve greater participation in the affairs of the communities involved, including public-private partnerships to document best practices and remove obstacles and solve problems.

The LCCAA strongly believes that self-sufficiency is part of a continuum of personal growth and development that includes taking opportunities to contribute to the involved communities, however defined. However, low-income residents have few opportunities to do so. They tend to be overwhelmed with the burdens of navigating the service system, preparing for work, advancing their educations, raising families, and just getting around. Many feel intimidated by the formality of governance meetings, such as the City Councils and Board of Supervisors. Even participating in LCCAA activities can be daunting, despite the LCCAA's well-articulated support for such participation. To participate, they have to overcome their own fears, class concerns, and unfamiliarity with how boards and meetings work. They also have to cope with the reluctance of some groups to value their participation and insights. Yet, they have real-life experience, practical intelligence, energy, and candid insights to contribute.

The LCCAA's own strategies to promote empowerment through participation start with its Board, which requires that agency staff support clients who want to participate in their communities. Staff encourage clients to participate in community organizations. They assist clients to overcome practical barriers to participation, such as lack of transportation or suitable clothing. We have found that our clients are most successful when participating in groups that directly affect them personally, e.g., supportive housing, emergency services, etc. Further, low-income clients have little patience with theoretical activities, strategic planning, etc. They are outstandingly successful, however, when linked to groups that are focused on concrete, measurable, practical goals. One example is the community's commitment to repairing and re-opening the Skateboard Park, located on the grounds of Austin Park in downtown Clearlake. Community organizers raised funds and obtained donated materials, recruited volunteer labor, and set up a gala dedication ceremony.

The LCCAA itself and its Board members and staff directly connect clients with opportunities to participate. These include:

- (a) Encouraging parents to serve on the Youth Services Advisory Board.
- (b) Inviting low-income and homeless clients to serve on the LCCAA's Emergency Food & Shelter Local Board.
- (c) Opportunities for low-income individuals to serve on the local Emergency Food and Shelter Board (Note: The LCCAA Executive Director is the chair of this board.)
- (d) Giving residents of the Transitional Shelter, New Beginnings, and Safe House opportunities to serve as volunteers with the LCCAA and our partners to become familiar with how non-profits work. They then use such practical experience and understanding of non-profit operations to apply for, serve on, or testify at various Boards and committees.

I. Documenting best practices based on grassroots interventions in urban areas.  
This is not directly applicable to entirely rural Lake County. Urban best practices assume the existence of a wide range of amenities not available in rural areas, such as intra-city and town transportation, frequent bus service, community centers, and public recreation programs, among others. They also assume very high population densities, e.g., inner-city neighborhoods of 10,000 or more in a few square blocks. The entire City of Clearlake, with its creeks and dams, has almost reached 15,000 residents.

II. Removing obstacles by participating in public/private partnerships.  
The LCCAA participates in the County's networked collaboratives. As opportunities for client participation arise, we alert our clients and our partners and bring them together. Some collaborative already recruit for citizen participants. The Countywide Healthy Start Collaborative's membership includes public and private agencies, volunteers, civic groups, education, and is open to concerned citizens. The new Co-Op is a community-driven, grassroots organization that relies on citizen volunteers to load boxes, deliver orders, maintain its website, and govern the organization. It is a key link in the development of a local market for affordable, healthy, fresh food, locally-baked

bread, and bulk-buying of staples. Low-income residents who participate in the Co-Op are directly contributing to the health and well-being of their communities, supporting local businesses, and also stretching their food budgets.

Many agencies require client or parent participation. These include Early Head Start and Head Start, both of which are networked with the LCCAA. Lake County Mental Health Services is funding parent partners and advocates through its MHSA programs to provide guidance and support for parents whose children (even as adults) are dealing with mental illness. Members of the local chapter of the National Alliance on Mental Illness ("NAMI") and the Mental Health Board recruit and support community-based participants. During this year's public hearings, the LCCAA was clearly informed that the community is very concerned about services to the mentally ill and wants more opportunities to participate in guidance and oversight related to such services.

The Children's Council has developed a paid Parent Partner position. The Parent Partner helps recruit other parents to provide input and evaluation to programs serving families, to offer a genuine grassroots voice, and to keep providers aware of changing obstacles and problems that block achievement of self-sufficiency. The goal of this position is to catalyze the formation of a Countywide Parents Council, with the responsibility of providing parent perspectives to the entire health and human services continuum. The various mandated parent groups (EHS, Head Start, et al.) could each have a place on the umbrella Council.

Increasing community members' participation in civic engagement is a strength-based strategy, not only for the services continuum, but for the participants themselves. They would benefit from the contacts, experiences, and training. Some will gain work-related experience and references, which can strengthen their résumés. The grass-roots voices and feedback will help service providers and planners respond to the changing real-life needs of the communities and constituents served.

As discussed, the LCCAA and DSS work as partners to support mutual clients attempting to transition off aid and services (e.g., TANF, CalWORKs, child welfare services, and foster care). Our continuum of services is all oriented around the overarching goal of assisting clients to achieve self-sufficiency. Specifically, we accept referrals from DSS to connect clients with the specific supportive services they need that remove barriers to self-sufficiency. These are detailed throughout this Requirement 3 and are provided either directly or by referral. As noted, they include free tax preparation, housing assistance, utilities assistance, business clothing, food, other clothing, and re-referrals to other services to improve employability. Clients working with us receive more community-based services that begin to integrate them back into the mainstream. The LCCAA's role is to build on the foundation for self-sufficiency developed by the client and, while the client is still within the safety net, assist the client to prepare for self-sufficiency. Safe House staff reunify children, when safe for both the child and parent or work with DSS and the foster family agencies to find appropriate foster care.

## **2. Section 676(b)(1)(B) – Addressing the needs of youth in low-income communities through youth development programs.**

The LCCAA took the lead to fill significant gaps in local youth development activities. As noted, there is a serious gap between demand and supply for comprehensive, high quality afterschool programs, especially for older youth. In addition, Lake County was unable to meet financial and service number requirements imposed by the national Boys and Girls Clubs and Big Brothers/Big Sisters. These requirements reflect the typical misunderstanding of urban-based organizations of the reality of rural economies. Specifically, the national Big Brothers/Big Sisters organization imposed new policies on local organizations, including \$100,000 in the bank, \$50,000 in operating expenses, and a minimum service population of 276 children. The local chapters had to close and stop using the national names. The LCCAA established Lake Youth Services to ensure that Lake County youth still had access to these services. In 2007, it opened the Lake County Youth Center in the former Boys and Girls Club facility in Clearlake, near Redbud Park.

The new Center serves both enrolled and drop-in youth. About 25-35 youth (aged 10-16) attend on a daily basis, with over 70 enrolled. The Center has a large commons room and separate recreation rooms for older and younger youth, since their needs and interests are so different. It has a full kitchen and large, clean bathrooms. The Center offers recreation, sports, dances, homework help, computer access, and cultural enrichment, and mentoring. It is open Monday-Friday, year-round, from about 2:15 to 5:30 p.m.

The Center is a gang-free, violence-free zone, enforced by the youth themselves. Youth who participate in safe, structured after school activities are protected from anti-social peers, gang recruitment, and other risks. [SAMHSA (April 19, 2007). *The NSDUH Report: Youth Activities, Substance Use, and Family Income*. Rockville, MD]. The Center has already proven itself as a gang deterrent. When the Center first opened, older youth wearing colors tried to enter a dance. They were turned away, conferred in the parking lot, doffed the offending attire, and were welcomed back. These same youth became some of the Center's most positive participants and are good role models for their younger peers. They are gang free and on the path to a bright future.

The Youth Services program offers several mentoring options. Big Brothers/Big Sisters, like other local mentoring programs, struggled with finding interested adults who could commit to one year of mentoring and pass the background. The new program added options to increase the number of children and youth who are mentored, as follows:

- (a) Continued to support existing adult/child partnerships and recruit, screen, and train new one-on-one adult mentors;
- (b) Match some of the 30+ children on the waiting list for adult mentors to screened and trained high school students. The Program Director of the Youth Center trains high schools students who have good grades and good behavior to mentor younger teens. They earn community service credits for serving as mentors.

(c) Family mentoring, in which an entire family mentors a youth, an option which may reassure volunteers who are uncertain or uncomfortable working one-on-one with a child or youth.

The Center's Youth Advisory Committee includes youth participants and community volunteers, including the Clearlake Lions Club and Lionesses and a resort owner. This Committee is facilitated by the LCCAA Executive Director. It is very productive. To date, it obtained: (a) a new sprinkler system and sod donated by the Rotary Club; (b) top soil delivery from Layne Paving; (c) donations from Farmers' Insurance, Wal-Mart (backpacks), and various repairs and plants from multiple small donors. Committee members and colleagues co-sponsored a Fishing Derby for youth, who were given fishing poles, tackle boxes, and a free lunch, followed by trophies and ribbons. Committee members obtained a donation of \$2,356 for the Derby. The City of Clearlake gave a \$500 sponsorship.

**3. Section 676(b)(1)(C). To make more effective use of, and to coordinate with, other programs related to the purposes of this subtitle (including State welfare reform efforts.**

Not applicable.

**1. Section 676(b)(4) – Emergency food.** The LCCAA is the County's largest provider of emergency food for low-income individuals and families. It provides emergency food at its two Food Pantries on a drop-in basis to counteract conditions of starvation and malnutrition among low-income individuals. The Hub-&-Spoke model program, including local growers' produce, detailed above, supplements our CSFP and Food Pantries with fresh fruits and vegetables. We deliver food to at least 16 locations around the County to make adequate supplies of healthy food available to three vulnerable groups: children aged 0-5, children no longer qualifying for WIC, and older adults. Many of our recipients are not able to drive or ride the bus for long distances. The CFSP helps seniors afford adequate supplies of nourishing food, counteracting potential starvation and malnutrition in the older adult community. It helps ensure healthy infant and child development, preparing our children for success in school and life. Hub-&-Spoke lets us deliver comparable food packages to individuals and families of all ages who cannot qualify for CFSP.

**2. Section 676(b)(5) – Coordinate and establish linkages between governmental and other programs – effective delivery.**

As detailed in the Profile and Needs Assessment, the LCCAA has well-established relationships with every provider of social services to the low-income community. Our referral network coordinates government and private programs. Our key partners in the areas of employment and training are both public and private, including: the Department of Social Services and its workforce development contractor, The Arbor (operator of JobZone and MiZone); the Lake County One-Stop Career Center (WIA); Goodwill; and the Salvation Army. Through WIA, low-income youth aged 14-21, adults,



and dislocated workers receive an array of services, including high school completion, skills/aptitudes assessments, job readiness, access to labor market information, Work Experience (youth program on-the-job-training), guidance, and counseling. Through its partners, clients are linked to education and training providers, financial aid sources, the Employment Development Department, and the Department of Vocational Rehabilitation. DSS provides interim survival supports, plus barrier removal services addressing mental health, behavioral wellness (including drug and alcohol abuse), domestic violence, and child abuse. Our staff refers individual clients to services. They provide basic case management, meeting with individual clients and following-up with the agencies to see the outcomes of each referral. Staff works with all clients to help them overcome barriers to success and stay on track to meet their goals. Transitional Shelter clients are required to actively seek employment and/or education. Our case managers monitor their progress to help ensure they are ready to succeed when they leave the Shelter. DSS can provide Section 8 housing vouchers for our Transitional Shelter graduates, another example of the benefits our partnerships bring to our clients. In addition, our Resource Directory (described in 676(b)(6), below, is an annually-updated tool which enables public and private agencies to coordinate services and establish linkages. The Resource Directory is distributed to participating agencies, in hard-copy or CD and is posted on-line.

**3. Section 676(b)(6). Coordination of anti-poverty programs; emergency energy crisis intervention available in our community.** LCCAA is the County's community-based source of coordination of anti-poverty programs, both public and private. The Resource Directory is our chief system-level strategy to assure the coordination of anti-poverty programs. DSS's Eligibility Workers have the Resource Directory loaded into their computers and consult it when developing case plans and referrals for applicants seeking help. Our primary strategy to ensure such coordination is our extensive networking with other organizations, including collaborative networks, public agencies, and private non-profits. Poverty-focused partners include: DSS, the Hunger Task Force, the California Association of Food Banks, Hub-&-Spoke, WIC, the Homeless Coalition, Healthy Start & the McKinney-Vento Homeless Student Assistance Program, and North Coast Opportunities.

LCCAA assures that low-income home energy assistance is available in Lake County through referrals and follow-up to North Coast Energy ("NCE"). NCE is based in Mendocino County, but provides LIHEAP to Lake County. It divides its funding and services among seven Counties. NCE's headquarters is located in Mendocino County, a 78-mile roundtrip away through a mountain pass. Our staff assists clients to complete LIHEAP applications and forwards those applications on their behalf. NCE has written a grant to solarize homes in 7 counties including Lake County. The process for choosing those homes is not yet final, but it will limit services to low-income residences only. Finally, Lake County's extreme weather conditions and dilapidated housing result in highly inefficient use of energy. NCE also provides the only weatherization program serving Lake County's low-income residents.

The LCCAA believes that Lake County's low-income community should have a local weatherization program. Our low-income population is growing, while our housing is deteriorating. Weatherization addresses several of the purposes of the Act: (a) it promotes employability by providing suitable living situations; (b) it promotes health by protecting residents from weather extremes; and (c) it helps low-income residents by reducing utilities costs, so residents are less likely to apply for assistance and more likely to become self-sufficient. Finally, weatherization reduces energy use and carbon emissions.

**4. Section 676(b)(9) – Coordination and partnerships.** LCCAA uses coordination and partnerships to leverage its core funding and create and implement a wide range of programs and projects to meet the changing needs and priorities of the low-income community. Our current partners include:

**The County of Lake:**

- ✓ *Board of Supervisors* overall; two Supervisors serve on the LCCAA Board
- ✓ *Mental Health* (which now includes Alcohol and Other Drugs Services), providing education, prevention, and treatment; tele-psychiatry for children; and Mental Health Services Act programs (the Lighthouse drop-in center for adults, transitional housing, crisis response, forensic services, housing services, clinical services for seniors).
- ✓ *Department of Social Services*, including the Housing Authority
- ✓ *1<sup>st</sup> 5 Lake* (Prop 10 Commission), providing strategic planning and funding for services benefiting children aged 0-5 and their families. Its Executive Director serves on the LCCAA Board
- ✓ *Department of Health Services*, providing immunizations, flu shots, public health nursing, Children's Health & Disability Program, Gateway Medi-Cal, Maternal and Child Health services, disaster preparation, disease surveillance, et al.
- ✓ *Code Enforcement*

**City Governments:**

- ✓ City Council, Clearlake; one Council member sits on the LCCAA Board
- ✓ Clearlake Police Department
- ✓ Code Enforcement

**Other Public Agencies:**

- ✓ *Women, Infants, and Children (WIC)*, providing nutrition and education for pregnant and post partum women, infants, and children under 6 who meet income eligibility requirements.
- ✓ *Lake County Office of Education*, which provides comprehensive services to children aged 0-19 enrolled in public schools, plus GED preparation and testing. Services include: state preschools, elementary school after school programs, Healthy Start, McKinney-Vento Homeless Student Assistance, Safe Schools/Healthy Students (clinical and counseling, after school,

alcohol/drugs/violence prevention curricula), Regional Occupational Program, Countywide Career Technical Education, School Attendance Review Board, Special Education Local Plan Area, work permits, and youth work programs.

### **Non-Profit Agencies:**

- ✓ *California Human Development Corporation*, providing employment development and educational planning to the Latino and migrant communities
- ✓ *Community Care (CCHAP)*, serving individuals with HIV and housing the MSSP
- ✓ *Hospice of Lake County*, providing end-of-life planning and care
- ✓ *Salvation Army*
- ✓ *Goodwill Industries*, a direct employer of low-income and disabled residents
- ✓ *United Way*, providing grants, training, and tri-county linkages
- ✓ *Lakeport Gleaners*, which provides fresh vegetables, access to local growers, and the Hub-&-Spoke program
- ✓ *Lake County Hunger Task Force*, which coordinates hunger studies and community gardens for Lake County, including contributing fresh fruits and vegetables to the Farm-to-Food distributions
- ✓ *St. Vincent de Paul*, providing clothes, food, and motel assistance
- ✓ *Easter Seals of Northern California*, identifying and assessing children with special needs and their families, training child care providers and others on such services, funding out-of-County transportation, and operating the Childhood Lead Poisoning Prevention Program
- ✓ *North Coast Opportunities*, an umbrella agency based in Ukiah, which administers Head Start, Rural Communities Child Care, Redwood Caregiver Resource Center (supporting caregivers of adults with brain impairments through education, research, services, and advocacy), Retired & Senior Volunteer Program, and Catalyst Community Support Services (offering a free Resource Library and Grant Research Facility on fundraising, grants, board development, etc., a variety of trainings for non-profits)
- ✓ *Redwood Coast Regional Center*, one of 21 private, non-profit centers in California serving as the entry point through which individuals with specific developmental disabilities and their families can obtain community supports and services, including Early Start for children aged 0-3 showing early signs of delay, assessments, diagnoses, Individual Program Plans, vendored services from other providers, and community services.
- ✓ *Legal Services of Northern California, Inc.*, the regional legal aid provider. LSNC provides advocacy and representation on health rights, affordable housing and housing discrimination, foreclosure and predatory lending, and race equity. It operates a Health Rights Hotline, Health Insurance Counseling and Advocacy Program, and a Senior Legal Hotline.
- ✓ *Lake Family Resource Center*, one of the County's largest non-profit service providers, which operates the only domestic violence shelter, the community crisis line, tobacco cessation, Early Head Start, child abuse intervention, Teen Parenting Services, behavioral health, and other health and human services. It is

one of the Differential Response contractors and coordinates Nurturing Parenting.

- ✓ *Toys for Tots, local businesses, and people in the community* partner with our Christmas volunteers for the annual toy drive.
- ✓ *HARC Enterprises*, which provides anger management classes for court-mandated clients. The LCCAA provides free counseling space to HARC and HARC allows non-court-mandated LCCAA clients to join its groups.

**Local Businesses:** (These small businesses donate food, materials, supplies, use of facilities, trainers, and publicity. Donations are usually small (\$500 -\$2,000) and project-specific. By Lake County standards, these are large gifts, however. We welcome the opportunity to acknowledge our community's ongoing generosity, despite hard times.)

- ✓ Bob's Vacuum
- ✓ Sunset Fishing Resort
- ✓ Foods, Etc. (which allows us office space and access to their freezers and coolers)
- ✓ El Grande Hotel
- ✓ Ray's Food Place
- ✓ Food Max
- ✓ Grocery Outlet
- ✓ Wal-Mart
- ✓ West America Bank
- ✓ Chef Le Chic
- ✓ Lake County Record-Bee
- ✓ Moore Family Winery
- ✓ Hardester's Market & Hardware
- ✓ Rob Roy Golf Course & Restaurant

**Service Clubs:** (These small clubs provide various supports, including money, labor for building projects, assistance in fund raising, etc. Again, most supports are project-specific.)

- ✓ Soroptomists
- ✓ Lions Club
- ✓ Rotary
- ✓ Kiwanis
- ✓ Random Acts of Kindness and Encouragement (RAKE)

**Food Program:** The LCCAA's food program has grown to involve 24 partners, including churches, senior centers, Native American Rancherias, and health care providers. Most provide drop-off points for food distribution, but others provide services. These partners are located around the County, ensuring that low-income residents have access to food. They are:

- ✓ Redwood Empire Food Bank
- ✓ Lakeport Gleaners (listed above)
- ✓ Lower Lake United Methodist Church
- ✓ Neighborhood Christian Fellowship
- ✓ New Jerusalem COGIC
- ✓ Village Baptist
- ✓ Northlake Adult Day Center
- ✓ North Shore Ministries
- ✓ Northlake Community Services
- ✓ First Baptist Church
- ✓ Calvary Chapel
- ✓ Parents and Community for Kids (PACK)
- ✓ New Beginnings (Note: New Beginnings is an LCCAA program)
- ✓ Community Care (CCHAP, listed above)
- ✓ Highlands Senior Center
- ✓ Lakeport Senior Center
- ✓ Live Oaks Senior Center
- ✓ Lucerne Alpine Senior Center
- ✓ Middletown Senior Center
- ✓ Middletown Methodist Church
- ✓ Robinson Rancheria – Pantry
- ✓ Seventh Day Adventist Church – Lakeport
- ✓ Lake Family Resource Center (listed above)
- ✓ Church of the Nazarene
- ✓ Scotts Valley Band of Pomo Indians
- ✓ Sutter Wellness Foundation

**5. Section 676(b)(10) – Procedures for low-income individuals or representatives to petition for adequate representation.**

The LCCAA reserves seats on its Board for low-income residents. We comply with the Brown Act, so our activities are transparent to the public. Meetings are open to the public and are noticed in the newspapers. The LCCAA has a grievance process for clients who wish to be heard on issues regarding our programs and/or how programs were delivered by staff. This process ensures all clients have a way to address their own issues and also to remove barriers for others.

**6. Section 676(b)(12) – ROMA.**

The LCCAA tracks the number of clients served and the services they utilize. WE follow reporting requirements and measure our results against the projected outcomes. Descriptions of changing trends and possible effects thereof on those projections are noted in our interim reports.

We do not have a ROMA trainer on staff. However, through our partnership with our sister CAP agency, NCO in Ukiah, we will be participating in a series of workshops being brought to Lake County for the first time. The workshops will cover how to improve programs, build better boards, grant research/writing, and ROMA-related planning and productivity assessments.

**7. Section 678(D)(a)(1)IB) – Compliance with Office of Management and Budget (OMB) standards.**

The LCCAA uses Generally Accepted Accounting Principles and receives an annual independent audit. It hereby assures that the cost and accounting standards of the OMB will continue to apply to it.

**8. Section 676(b)(3)(A). Description of service delivery system for services provided or coordinated with funds from grants under Section 675C(a).** Section 676C(c) references Section 672, Purposes and Goals, listing permitted uses of such funds. Its overarching goal is to assist local communities, through a network of community action agencies, to reduce poverty, revitalize low-income communities and empower low-income families and individuals to become fully self-sufficient, by:

- (A) **Strengthening community capabilities for planning and coordinating** the use of a broad range of Federal, State, local, and other assistance (including private resources) related to the elimination of poverty, so that this assistance can be used in a manner responsive to local needs and conditions;
- (B) **Organizing a range of services** related to the needs of low-income families and individuals, with measurable and potentially major impacts on the causes of poverty that may help families and individuals to achieve self-sufficiency;
- (C) **Increasing the use of innovative and effective community-based approaches** to attacking the causes and effects of poverty and of community breakdown;
- (D) **Maximizing participation** of residents of the low-income communities and members of the groups served by programs assisted through the block grants to empower them to respond to their communities' unique problems and needs; and
- (E) **Broadening of the resource base** of programs directed to the elimination of poverty so as to secure a more active role in the provision of services for (i) private, religious, charitable, and neighborhood-based organizations; and (ii) individual citizens, and business, labor, and professional groups, who are able to influence the quantity and quality of opportunities and services for the poor.

The LCCAA is the hub of planning, service delivery, and leveraged resources dedicated to ameliorating the causes and effects of poverty and empowering low-income

individuals and families to achieve self-sufficiency. The LCCAA uses the CSBG funding: (1) as "seed money" to leverage other resources; (2) to provide reliable emergency services; (3) to create a stable link for all stakeholders connected with the low-income community; and (4) to "incubate" new and innovative community and neighborhood-based initiatives.

Briefly, our activities in response to the purposes listed above are:

(A) The LCCAA prioritizes increasing community capacity for planning and coordinating the use of a broad range of other resources. The CSBG funding covers overhead (building, utilities, supplies), administration, planning, fiscal management, grants research, program development, and reliable direct client support services. This funding provides the LCCAA's foundation, facilitates leveraging, and provides continuity and credibility for our clients, partners, and the community as a whole. The CSBG funding is essential to the well-being of our low-income clients, but is not sufficient to allow the LCCAA to meet our communities' many needs.

Therefore, the LCCAA Board and Executive Director continuously research grant and other funding opportunities, pursue collaborative partnerships, and network with key leaders, civic groups, governments, and others. Our efforts educate potential partners on the cost-effectiveness of investing in services to transition low-income individuals and families to self-sufficiency. We then offer them opportunities to follow through with programs and areas of their choice. For example, the Rotary Clubs adopted the Youth Center during its start-up phase, as detailed above. Our Executive Director meets with local governments, collaboratives, community groups, Rotary, Friends of the Safe House, Red Cross, FEMA, and many others. Her networking ensures that the needs and concerns of the low-income community are factored into community planning and coordination at many levels, from the Clearlake City Council to issue-specific volunteers. Our Resource Directory directly increases community capacity by providing potential partners with information on available services and contact information. Individuals seeking help can consult the Directory to locate service providers; service providers use it to connect clients to other resources.

(B) Our LCCAA invests most of its resources in organizing a range of services, from emergency survival supports, such as the Food Program, to education and employment planning. Our Food Program exemplifies our service delivery system. We use the CSBG funding to pay for administration, some warehousing, fuel, trucks, and records. We are a Subsidiary Food Distribution Organization, with the Redwood Empire Food Bank and have assembled 24 partners and member agencies that augment our food supplies with fresh fruits and vegetables and provide supervised drop-off locations for our CSFP and Farm-to-Family Programs.

(C) The LCCAA provides leadership to develop and implement (or maintain) innovative community based approaches to attack the causes of poverty. Examples include: (1) opening New Beginnings to ensure that mothers of tox pos babies have

both day treatment and residential treatment (when the former Drug Abuse Alternatives Center closed); (2) the Youth Services Program and Youth Center.

(D) The LCCAA maximizes participation of low-income residents in their communities and programs that serve them, as detailed here. The experience of successful participation in such activities has multiple benefits. Individuals gain self-esteem, valuable social and communication skills, experience in developing programs and negotiating with others, contacts with business and community leaders, transferable skills for work, and references for their résumés. The groups inviting such involvement obtain clear and direct knowledge of the issues confronting the low-income community, so they can adapt services accordingly. The experience of working together builds community cohesion, overcoming the socio-economic divide that can create prejudice.

(E) The LCCAA's efforts to **broaden the resource base** arise from its financial limitations and commitment to networking and leveraging resources. In three years, the LCCAA's core CSBG funding of \$498,000 has been leveraged to over \$2,300,000 from a variety of sources, plus volunteer hours. These are minimum amounts. Some programs generate significant funds and volunteer hours, which are not quantified because doing so is not feasible. For example, the Friends of the Safe House donate hundreds of hours of time each year in planning, service design, locating models, writing grants, donating labor, materials, furnishing, and food, and organizing fund raisers. As listed above, the LCCAA has a constantly-expanded network of partners.

The core funding stabilizes the agency's infrastructure. It supports administration of the shelter and the Food Banks. It ensures that the agency holds regular office hours, so individuals can drop in and connect with staff, speak to someone on the telephone, and obtain emergency food, clothing, and other help. It also serves as "match", which is heavily weighted by private foundations. The LCCAA continues to seek funding to sustain or expand core programs, the Transitional Shelter's operating costs, the Youth Services program and Youth Center, and miscellaneous expenses, such as drivers' license fees, telephone cards, personal hygiene products, and backpacks for school-aged children. Demand for all services continues to rise, while sources of funding dry up. The stability provided by the CSBG core funding is essential during this period of scarcity.

The LCCAA has expanded its resource base with community supports, new partners, grants, donations, and programs, as detailed in NPI-5.1 and throughout these Federal Assurances. For example, court-sponsored drug-dependency diversion program now provides revenue to New Beginnings. The court recommends diversion to a defendant's attorney; if the defendant agrees to go into treatment and out-patient care and completes the program, then she does not have to go to jail. The LCCAA continues to seek new ways to increase revenue, as detailed in NPI-5.1.

Volunteers are a key resource for the LCCAA and its many partners, both public and private. Volunteers leverage resources and help link the groups they serve with the larger community. Well-managed volunteers also develop work skills, contacts,



networks, and references, creating natural support networks, both business and personal. However, recruiting, training, and retaining volunteers are community-wide challenges. The LCCAA has developed a small cohort of dedicated volunteers and relies on the community service program of Carlé Continuation High School. Many of Carlé's students and families have been helped by the LCCAA and are eager to give back to the agency.

The LCCAA participated in the Volunteer Summit, held in May 2009. The Summit brought together community members and key leaders from diverse groups. It developed plans for volunteer recruitment, including a Volunteer Fair to match volunteers with groups who need them and a Volunteer Recognition Event, to honor all volunteers. The LCCAA Executive Director has coordinated such events and will be coordinate the organization of the County's first such event. The first Volunteer Recognition Event is tentatively scheduled for Fall 2010.

In addition, the LCCAA has partnered with NCO to implement a California Volunteer Matching Network ("CVMN") Hub Grant. NCO operates the existing volunteer network which is supposed to serve both Lake and Mendocino Counties. To date, it has not been able to establish a network in Lake County. Under the CVMN grant, NCO will be the Hub Organization, acting as a local volunteer connector. The LCCAA will be the spoke organization. The CVMN is a capacity-building program that uses an on-line volunteer matching tool to help Californians find local volunteer opportunities and increase the efficiency and impact of the volunteer sector.

The LCCAA has already identified partners to leverage the CVMN. AmeriCorps will dedicate a member two days/week for this effort. When the Volunteer Network is operational, we will add a Vista Volunteer to augment its efforts. We also plan to involve Mendo-Lake Alternative Services, Inc., the local non-profit which matches individuals (adult and juvenile) with court-ordered community service to screened opportunities. Their expertise and network will strengthen the larger Volunteer Network. Disaster preparation and response may be a top priority. As documented in the Profile and Needs Assessment, Lake County is subject to a wide range of natural disasters, exacerbated by our rugged geography, lack of paved roads and infrastructure, cell phone "holes", and the like. Therefore, providing CPR and 1<sup>st</sup> aid training to volunteers will increase our capacity for first response in the event of disaster.

#### **9. Section 676(b)(3)(B) – How linkages will be developed to fill gaps.**

The LCCAA will continue its proven methods of linkages development. Our staff is the primary providers of linkages on the client level. They provide information on services to meet each client's individual needs, make referrals, and provide follow-up calls or goal meetings for outcome information on referrals, where appropriate and beneficial to the client. The agency updates and releases its Resource Directory each year. This tool provides information about agencies to clients, staff, and other agencies. Staff and clients use it to connect with services to fill gaps; providers use it to make inter-agency

referrals and to complete case plans. Finally, our Executive Director participates in collaborative networks, strategic planning, and assessments. She works with our Board to identify gaps in the continuum of services for low-income individuals, develop strategies to fill them, recruit providers, and locate funding to implement the strategies. Our expanded Food Program exemplifies the success of this approach.

**10. Section 676(b)(3)(C) – How funds made available through grants under 675C(a) will be coordinated with other public and private resources.**

As detailed throughout these Federal Assurances, the LCCAA coordinates its core funding with public and private resources from multiple sources. Such coordination is a cost-effective and proven method to leverage funding and stabilize programs. For example, New Beginnings operates with blended funding from Alcohol and Other Drugs Services, Medi-Cal reimbursement, court-supported diversion, and Redbud Health Care District. Our Safe House came together with private contributions, donation of the house itself, private fund-raising, plus donated labor, materials, and supplies. The LCCAA supplied the organization, coordinated the documentation of the fund-raising, provided fiscal oversight, recruited, hired, and trained staff, and handles day-to-day oversight. The CSBG funding made all of this possible. Coordinated funding supports our Transitional Shelter, emergency food and housing, access to energy assistance, weatherization, legal services, food distribution, Youth Services and Youth Center.

**11. Section 676(b)(3)(D) Description of how entity will use the funds to support innovative, community and neighborhood-based initiatives related to the purposes of this subtitle which may include fatherhood initiatives and other initiatives with the goal of strengthening families and encouraging effective parenting.**

The LCCAA's primary focus is on empowering individuals and families to overcome poverty, which has the collateral effect of strengthening families and encouraging effective parenting through stress reduction and education. In addition, we offer services and support programs that directly strengthen families and encourage effective parenting, including:

- ✓ Providing access to free anger management classes for both court-ordered and voluntary clients, with separate classes for men and for women. Anger management includes stress reduction techniques. The net effect is to promote peaceful families, reducing children's exposure to violence, and helping adults concentrate on their tasks as parents, workers, and citizens.
- ✓ Providing access to weekly AA classes, which help adults stay clean and sober. The money formerly spent on drugs and alcohol is available for food, shelter, children's clothing, car repairs, recreation, and family activities. With more money available, families are less stressed and more peaceful.
- ✓ New Beginnings directly supports stronger families, by helping mothers involved with drugs and alcohol to achieve and sustain sobriety, while also learning about

child development, Nurturing Parenting, and life skills, such as budgeting. Sober mothers have the emotional, physical, and financial resources to support and parent their children. Their families are stronger and their children are more likely to succeed in school and at life. This initiative benefits two generations and has long-term benefits for the greater community.

- ✓ Providing nutrition education and money management classes at the Transitional Shelter and our headquarters, helping parents to feed their children healthy, tasty meals that promote healthy eating habits for life. Such children are less likely to develop obesity, cardiovascular disease, and diabetes. Family dinner is proven to strengthen families, but first the parents have to know how to cook.
- ✓ Providing referrals to other agencies and groups which provide services that directly promote family strength and effective parenting. For example, we refer families to Differential Response. These are families who are reported for child abuse and neglect, but whose conduct does not permit the Department of Social Services to intervene. These families are sometimes in crisis and sometimes dysfunctional. Early intervention avoids the need for children to be removed, preserving the family unit. The Countywide Nurturing Parenting Program provides age-appropriate classes for parents to help them understand their children's developmental needs and to learn positive, non-violent parenting techniques. Lake FRC coordinates classes throughout the County, both voluntary and court-ordered. As noted, LCCAA works closely with these agencies.

**Requirement 4**  
**STATE ASSURANCES**  
California Government Code

**Attach or type a narrative description of the Assurances listed below:**

**1. Section  
12730(h):**

Eligible beneficiaries are the following: (1) all individuals living in households whose income is at or below official poverty income guidelines as defined by the United States Office of Management and Budget; (2) All individuals eligible to receive Temporary Assistance to Needy Families or Federal Supplemental Security Income benefits, and (3) Residents of a target area or members of a target group having a measurably high incidence of poverty and which is the specific focus of a project financed under this chapter.

The LCCAA keeps demographic records for all clients who come in for services. We accept as clients: (1) all individuals living in households whose income is at, or below, official poverty income guidelines; and (2) all individuals eligible to receive TANF or SSI. In addition, on a case-by-case basis, we provide projects tailored to the needs of residents of a high-target area or who are members of a target group having a measurably high incidence of poverty. Because Lake County as a whole is so poor, we do not have the dramatic stratification between very wealthy exclusive areas and very poor areas that are found in more prosperous jurisdictions. The current economic crisis has had a leveling effect on our somewhat more prosperous areas, e.g., the gated community of Hidden Valley Lake has had a surprisingly high foreclosure rate. Custom-built homes on large lots that once sold for \$250,000 to \$500,000 have been available for \$125,000 or less.

**2. Section  
12747(a):**

Community action plans shall provide for the contingency of reduced federal funding. Provide your agency's contingency plan for reduced federal funding. Also, include a description of how your agency will be impacted in the event of reduced CSBG funding.

In the event of reduced federal funding, the LCCAA will respond as follows:

1. Reach out to the County, the City governments, and our partner agencies to assure the continuation of programs and services
2. Intensify and diversify its fund-raising activities, e.g., expanding direct mail and donor outreach. We are planning to propose to our fellow non-profits that we jointly invest in donor database software, which is very expensive, by local standards.

3. Work with local attorneys, estate planners, and financial planners to explore the creation of planned giving, charitable bequests, and endowment development to create both current income and quantifiable projected income.
4. Continue to explore public and private foundations for program funding.
5. Consult our Board of Directors to choose the strategies that will best ameliorate the impact of reduced funding on the LCCAA, our programs, partners, and clients.

Please Note: The activities noted in Items 2, 3, and 4 are already at least in the planning stages, in anticipation of continued economic weakness at the local, state, and federal levels.

**3. Section  
12760:**

Community Action Agencies funded under this article shall coordinate their plans and activities with other eligible entities funded under Articles 7 (commencing with Section 12765) and 8 (commencing with Section 12770) which serve any part of their communities, so that funds are not used to duplicate particular services to the same beneficiaries and plans and policies affecting all grantees under this chapter are shaped, to the extent possible, so as to be equitable and beneficial to all grantees and the populations they serve.

The CSBG funding gives the LCCAA's Executive Director the time and resources to coordinate and collaborate with other service providers, through memberships in collaboratives, planning groups, networks, and via extensive one-on-one contacts. We collaborate and coordinate with public and private agencies throughout the County to develop complementary services and avoid duplication. Many of our agreements have been formalized in MOUs. However, one of the advantages of our small community is that we see each other often at meetings and community events. A significant amount of coordination and networking occurs informally. Our Board members also serve on other boards and committees that provide relevant services throughout the community. As a typical example, one Board member is the Executive Director of 1<sup>st</sup> 5 Lake, serving children 0-5 and their families. He also serves on the Health Leadership Network, Healthy Start, and the Children's Council. The Resource Directory provides an invaluable tool that provides our staff and our partners' staff with access to comprehensive, current information on available services. We maintain detailed client records that document what services have been provided by the LCCAA and what referrals have been made or need to be made, as applicable. The CSBG funding supports case management, so our staff can make sure, on a case-by-case basis, that clients are receiving essential services without duplication. Lake County's collaborative culture facilitates inter-agency integration to maximize the coverage we can provide to all clients, equitably.

PLEASE SEE ATTACHMENTS

**Requirement 5**  
**DOCUMENTATION OF PUBLIC HEARINGS**  
 Government Code Section 12747(d)

Agencies holding public hearings pursuant to this Article shall identify all testimony presented by the poor, and shall determine whether the concerns expressed by that testimony have been addressed in the Community Action Plan (CAP). If the agency determines that any of the concerns have not been included in the CAP, it shall specify in its response to the CAP information about those concerns and comment as to their validity.

This section shall include the following:

1. Attach or type a narrative description of your agency's public hearing process. Agencies should describe the methods used to invite the local community to the public hearings. Note: Public hearing(s) shall not be held outside of service area(s).
2. One copy of each public notice(s), published in the media to advertise the public hearing.
3. Attach or type a summary of all testimony received using the format below:

Name	Sector (low-income, private, public)	Testimony or concerns	Was the concern addressed in the CAP?	If so, indicate the page #	If not, indicate the reason

4. Attach or type a narrative description of other methods the agency used to gather information on the needs of the community ( i.e. surveys, public forums, etc).

## **Requirement 5**

### **(Documentation of Public Hearings)**

#### **1. Description of Public Hearing Process:**

The public hearing notices were published in our county's news paper, the Record Bee. Our local Community Radio (KPFZ) did a public service announcement noting the dates, times and locations of the agency's meetings. These two avenues are the best way to get out our events and activities out to our potential audience. In addition, we posted our flyers at various public locations and handed out notifications to other non-profit agencies who serve low-income families and individuals. Some organizations received a phone call from us to remind them of the hearing closest to their town.

Our board was included in the notification process and members were asked to participate whenever possible. Any board member who had not helped facilitate at prior agency hearings were briefed on how to pose questions, to identify problems and respond with possible solutions. Hearings opened with introductions and exchange of information about how our agency works and what programs we provide to meet client needs. The Executive Director and Executive Assistant were present at all meetings. Hand outs were given to each guest and each was requested to identify the most important concerns in their community (self, family, community), on our survey forms.

The hearings were held for two hours and in some cases ran overtime. Minutes were kept and noted in the summaries for the plan.

#### **2. See Attachment(s) of Advertisement for Hearings**

#### **3. Summaries of Testimonies are Attached**

#### **4. Description of Information Gathering through Surveys:**

Survey forms were developed to include services we can provide either directly or indirectly. Instructions requested that the client indicate their top concerns as each related to self, family and community. These surveys were given to clients who came to our agency and other locations serving the low-income population. We noted in reviewing the forms that often people looked at each category as important to the population.

To get the perspective of other non-profits serving low-income families and individuals, we provided them with our forms also or talked to managers directly for insight as to the county's needs.

Once the forms were returned, responses were calculated by the three categories – self, family and community and broken down by age groups. A total of all view points

are noted on the spread sheets. Some of the results indicate: from the community under **"self"**, that in the area of employment, the biggest concern/need is links to job opportunities. The survey also reveals that the job opportunities aren't out there and even part-time work availability isn't sufficient for the need. Under **"client family"** concerns the biggest issue is childcare. The clients' total view under **"community"** is that reliable transportation is a problem for many and/or when transportation is an obstacle it is difficult to job search.

Food was another big need for **"self"** and in the view of all clients, food insecurity is prevalent in their **"communities"**.

Housing concerns **"self"** and **"family"** categories tell us assistance with utilities continues to be important because of the increased cost of these needs. Budgets are not meeting all housing expenses. There is a notable shortage of Section 8 or affordable housing in the view of the client when looking at the **"community"**.

When it comes to health issues, mental health concerns are the greatest need not being met. 60% of the clients think the **"community"** is suffering disorders and are not being assisted at all or just in limited ways. Clients recognize addiction treatment/recovery and home care or assisted living should be better addressed as well.

Also in the perception of the clients who filled out the surveys regard youth programs as an important part of the overall community need. The agency is working to develop more recreational and cultural opportunities for Lake County youth. The new programs and locations will be announced this year.